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COUNTY BOROUGH OF PRESTON.

REPORT

OF THE

Medical Officer of Health

on the Health of the Borough
for the year

1926.

PRESTON;
R. Seed & Sons, Printers, 43 Guildhall Street.
1927.

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HEALTH COMMITTEE (1926-27).

Chairman: Mr. Councillor Richard Durham.

Vice-Chairman: Mr. Alderman T. H. C. Derham, m.b., c.m.

His Worship the Mayor.
Mr. Alderman H. Fazackerley.
Mr. Councillor F. W. Collinson, f.r.c.s.
Mr. Councillor E. C. C. Firth, j.p.
Mr. Councillor R. C. Handley, j.p.
Mr. Councillor J. Herbert.
Mr. Councillor V. Partington.
Mrs. Councillor A. M. Pimblett.
Mr. Councillor T. C. Rainford.

MATERNITY AND CHILD WELFARE COMMITTEE.

Chairman: Mrs. Councillor A. M. Pimblett.

The Health Committee, Alderman Snelham and Councillors Sergeant, Heaps and Ramsey, with the following ladies adopted as Members:—

Mrs. Barwick.
Mrs. Dunbar, j.p.
Mrs. Marsden, j.p.
Mrs. Todd, j.p.
Mrs. Stangar.

TUBERCULOSIS SUB-COMMITTEE.

Six Members of the Health Committee, with the following Members of the Insurance Committee adopted as Members:—

Mr. J. Corbishley.
Mr. W. Pemberton.

Report of the Medical Officer of Health.

To the Chairman and Members of the Health Committee.

MR. CHAIRMAN, MRS. PIMBLETT AND GENTLEMEN,

I have the honour to submit to you the annual report upon the Sanitary Condition of the Borough for the year 1926.

The absence of any epidemic of magnitude affecting either the general population or those of tender years accounts for the comparative excellence of the vital statistics. The death rate was low and the mortality of infants as measured by the number of deaths per 1,000 births was lower than in any year previously recorded. The measures taken for the preservation of infant life were amplified by the inauguration of the central clinic at North Road, where facilities are available for the treatment of minor ailments among children. Included in this scheme are arrangements for the treatment of dental defects in nursing and expectant mothers and young children and the employment of a qualified masseuse for the treatment of rickets and malnutrition.

Although a great proportion of delicate children are below the normal on account of hereditary influences there is a great deal of unnecessary debility and weakness caused by errors in nutrition and I think that the unwearying efforts of the Health Visitors to teach a right attitude towards this difficult question are slowly bearing fruit. The classes in cookery and housewifery organised by the Voluntary Workers' Association at the centres are also of very great value in this respect.

Notwithstanding the adverse social conditions which have prevailed for the last five years, the position of affairs as regards tuberculosis is satisfactory. We are holding our own and with the increased value of the weapons at our disposal such as the new " Chestnuts " Hospital, X-Ray diagnosis and the supervision of the milk supplies, further progress should be realised in the near future. I do not anticipate, however, any striking improvement until trade improves, further progress is made in housing and until there is a marked improvement in atmospheric purity.

The Health Committee seem to be in a particularly difficult position as regards smoke pollution. Any other offence against the public is dealt with in an expeditious manner. Any nuisance of whatever degree seems capable of amendment but not smoke. Our water supply is as near purity as possible, our arrangements for the removal of liquid and solid waste matters are quite satisfactory, our food is guarded in a way that many regard as mere fussiness, and yet we tolerate a pollution of the air we breathe so great as to cause injury to our buildings and their contents and illness and premature death to our people.

The basic cause of this state of affairs seems to be partly due to the weakness of the existing law on the subject—one proved offence should be the subject of a prosecution instead of a long drawn out statutory notice—and partly to a lack of appreciation of the injury they are doing by those responsible. No chimney need smoke providing it is of sufficient height, that there are sufficient boilers and that stoking is conscientiously performed. One would have thought that the obvious waste of fuel, the injury to textiles in process of manufacture and the general discomfort would have led to some concerted action by trade itself to provide a remedy but I regret to record that there is no sign of any material improvement.

In the body of the report will be found the work of the department set out in convenient sections to which I would draw your careful attention.

During the period under review I have been loyally supported by my colleagues and I wish to thank you Mr. Chairman and Members for your continued kindness and consideration.

I am,

Your obedient Servant,

F. A. SHARPE,

Medical Officer of Health.

The following figures as to the cost of the Health Services are summarised from the annual report of the Borough Treasurer for the year ended March 31st, 1926 :—

	Expenditure			Income		
	£	s.	d.	£	s.	d.
Maternity and Child Welfare	5563	3	10	2949	2	9
Meat Inspection	888	8	7	138	16	9
Public Health	6732	9	7	1825	12	10
Disinfecting	1738	19	7	1420	18	2
Port Sanitary	451	5	2	116	8	10
Elswick Hospital	52	10	0	17	10	0
Isolation Hospital	8602	0	9	183	17	5
Venereal Diseases	1733	1	2	1374	5	3
Treatment of Tuberculosis	8313	18	9	5021	19	0
Contagious Diseases of Animals	126	5	10	...		
Food and Drugs Act	412	10	5	...		
Midwives Act	16	14	9	...		
Medical Inspection and Treatment (Elemty. Ed.)	4547	14	0	79	11	0
Medical Inspection (Higher Education)	145	0	0	...		
TOTAL	39324	2	5	13128	2	0

The figures are nett and include the grants from the Ministry of Health with regard to Maternity and Child Welfare, Venereal Diseases, Tuberculosis, Port Sanitation and the Medical Inspection of School Children.

I.—Natural and Social Conditions of the District.

VITAL STATISTICS SUMMARY.

Area in Acres	3,964
Population, estimated middle of 1926... ...	124,200

	1922-23	1923-24	1924-25	1925-26	1926-27
Rateable Value ...	£591,770	£598,748	£605,474	£613,007	£622,256
Sum represented by a penny rate ...	£2,100	£2,150	£2,276	£2,320	£2,400
	s. d.	s. d.	s. d.	s. d.	s. d.
Total Rates Levied ...	13 9	12 6	11 10	12 1	12 3
Rate for Public Health	0 8¾	0 8¾	0 8⅝	0 9¾	0 9½
,, Highways ...	1 2½	1 4½	1 4¾	1 5½	1 3⅞
,, Scavenging .	0 6	0 5	0 5⅛	0 5½	0 5⅜
,, House Refuse	0 10	0 9½	0 9	0 9⅛	0 10¼
,, Sewerage ...	0 6¾	0 6	0 5⅞	0 6½	0 6½

	Males.	Females.	Birth Rate.
Births—Legitimate ...	1,075	970	16.47
Illegitimate ...	50	65	0.93

Deaths—Nett ... 1,596 Rate 12.85

Number of Marriages—869. Marriage Rate—7.00

Number of women dying in, or in consequence of, child birth—
From Sepsis—8 From other causes—9

Deaths of infants under one year of age per 1,000 births—
Legitimate—83. Illegitimate—217. Total—90.

Deaths from Measles at all ages	Nil.
,, Whooping Cough	1
,, Diarrhœa (under two years)	24

POPULATION.

The following information is supplied by the Registrar-General :—

County Borough of Preston.
Estimated Population : 124,200.

" The estimate of population as at 30th June, 1926, is supplied for use in connection with the vital statistics of 1926. It has been derived from the 1921 Census population (corrected where necessary to give a closer approximation to the resident population of that year as described in the Registrar General's Statistical Review for 1921) after allowance for the births, deaths and migration which occurred between the census date and the 30th June last.

" In the absence of definite information regarding migration between localities, the allowance made for this element of the movement is necessarily an approximate one. The method adopted has been applied impartially to all areas of the country, and it is believed that for the majority of areas the resulting populations may be accepted as sufficiently accurate for the purposes they are intended to serve.

“It is to be observed, however, that the basis of estimation has been modified from time to time in the light of accumulated evidence regarding the effect of the migration factor, and in some areas there may accordingly appear to be a lack of continuity between the estimates of successive post-censal years. The figures given above is believed to provide as true a measure of the position in June last as the data permit, but the difference between that figure and the corresponding estimate for 1925 is not necessarily representative of the births, deaths and migration which occurred between the 30th June, 1925, and the 30th June, 1926.”

The Vital Statistics of the various wards are set out in the table below. As will be seen, they vary very much from one another, and a reference to previous reports shews that they vary from year to year.

TABLE IA.

WARD	Census 1921	Estimated Population, June, 1926	Nett Deaths	Rate per 1000 living	Births	Rate per 1000 living	Deaths of Infants	Infant Mortality per 1000 born
St. John's ...	11647	12216	170	13.91	211	17.27	26	123
Avenham	7155	7456	97	13.01	114	15 29	15	131
Christ Church	8474	8885	125	14.07	155	17.44	11	71
Ashton ...	9030	9364	94	10.04	116	12 39	5	43
Maudland ...	9641	10103	127	12.57	168	16.63	12	71
St. Peter's ...	11319	12043	186	15.45	222	18.43	23	104
Moorbrook ...	8736	9185	81	8.82	124	13.50	6	48
Park	14470	15192	189	12.44	268	17.64	26	97
Trinity	9684	10145	160	15.77	195	19.22	23	118
Deepdale ...	10743	11823	159	13.45	229	19.37	26	114
Ribbleton ...	9065	9981	127	12.72	243	24.34	17	70
Fishwick ...	7442	7807	80	10.25	115	14.73	5	43
Unknown ...	...	...	1	...	...	...	...	...
	117406	124200	1596	12.85	2160	17.39	195	90

Compared with 1925 there has been an increase in the number of deaths from Encephalitis Lethargica (1—3), Tuberculosis of the Respiratory System (97—101), Cancer (149—167), Organic Heart (173—219), Arterio Sclerosis (71—111), Diarrhœa and Enteritis (28—30), Acute and Chronic Nephritis (34—46), Puerperal Sepsis (6—8), Other Accidents and Diseases of Pregnancy and Parturition (7—9), and a decrease in those caused by Scarlet Fever (9—1), Whooping Cough (39—1), Diphtheria (18—8), Influenza (59—37), Other Tubercular Diseases (47—39), Diabetes (27—20), Cerebral Hæmorrhage (118—90), Bronchitis (143—95), Pneumonia (175—131), Other Diseases of Respiratory Organs (20—16), Appendicitis and Typhlitis (14—11), Congenital Debility and Malformation, Premature Birth (106—89), Other Deaths from Violence (46—40), Other Defined Diseases (322—273), Ill-defined Diseases (29—20).

There were 11 deaths from Suicide, compared with 10 last year, and six in 1924. In the five years 1914-18 the average was 8.8, and in the succeeding five years 12.6.

There were 1,646 interments at the Cemetery.

The tables which follow deal with the Vital Statistics, and compare them with previous years and with other towns. They also illustrate the mortality in the various Wards. The figures supplied by the Registrar-General agree in the totals with those locally compiled, but differ slightly in detail.

TABLE 1B.

Year.	No. of Births.	Rate per 1000 Living.	No. of Infant Deaths.	Infant Mortality.	No. of Deaths.	Rate per 1000 Living.
1906	3317	28.49	665	200	2065	17.74
1907	3124	26.68	495	158	2003	17.10
1908	3309	27.56	516	156	1975	16.45
1909	3027	25.54	416	137	1721	14.52
1910	2812	23.58	438	156	1758	14.74
Average	3118	26.37	506	161	1904	16.11
1911	2726	23.25	473	173	1984	16.92
1912	2753	23.40	342	124	1972	16.76
1913	2888	23.95	462	160	2043	16.98
1914	2841	23.97	401	141	1873	15.80
1915	2546	21.48	395	155	2086	18.63
Average	2751	23.21	415	151	1992	17.02
1916	2315	19.36	254	109	1774	16.14
1917	2019	16.96	255	124	1660	15.46
1918	1906	16.07	213	113	1944	18.36
1919	2086	17.45	225	110	1760	14.72
1920	2984	24.43	301	101	1659	13.60
Average	2262	18.85	250	112	1759	15.66
1921	2811	23.44	316	112	1595	13.30
1922	2482	20.53	242	97	1662	13.75
1923	2426	19.11	238	98	1676	13.77
1924	2328	18.91	225	97	1714	13.92
1925	2174	17.69	286	131	1787	14.54
Average	2444	19.94	261	107	1687	13.86
1926	2160	17.39	195	90	1596	12.85

Other Deaths from Violence numbered 40. They are set out in detail in the following Table, where it is shown that the largest single cause of accidental death is motor accidents, followed by works accidents, and burns.

	Total	0–1	1–2	2–5	5–15	15–25	25–45	45–65	65–75	75 & over
Knocked down by horse	1	...	1	...	...	...	...	...	...	...
Scalds	4	...	...	4	...	...	...	...	...	...
Burns	4	...	...	...	...	...	...	...	2	2
Drowning	5	...	...	1	...	2	...	2	...	...
Poisoning	2	...	...	1	...	1	...	...	...	...
Motor Accident ...	11	...	...	...	3	3	3	2	...	...
Works	7	...	...	...	...	1	3	3	...	...
Gas Poisoning ...	2	1	...	...	...	...	1	...	...	...
Falling	2	...	...	...	...	...	...	1	...	1
Exposure and Fatigue	1	...	...	...	...	...	...	...	...	1
Asphyxia whilst sleeping	1	1	...	...	...	...	...	...	...	...
TOTALS ...	40	2	1	6	3	7	7	8	2	4

TABLE IC.

Vital Statistics of whole District during 1926 and previous nine years.

YEAR.	Total Population.	BIRTHS. Nett.		CIVILIAN POPULATION.	TOTAL DEATHS REGISTERED IN THE DISTRICT.		TRANSFERABLE DEATHS.		NETT DEATHS BELONGING TO THE DISTRICT.			
									Und'r 1 yr. of age		At all Ages.	
		Number.	Rate.		Number.	Rate.	of Non-resid'ts registered in the district	of Residents not regist'd in the district	Number.	Rate per 1,000 Nett Births.	Number	Rate.
1917	118,993	2019	16.96	106747	1461	13.69	57	241	255	124	1660	15.46
1918	118,595	1906	16.07	105845	1778	16.79	66	232	213	113	1944	18.36
1919	122,168	2086	17.45	117277	1619	13.55	66	207	225	110	1760	14.72
1920	122,133	2984	24.43	121950	1539	12.57	83	203	301	101	1659	13.60
1921	119,900	2811	23.44		1449	12.08	61	207	316	112	1595	13.30
1922	120,900	2482	20.53		1528	12.64	74	208	242	97	1662	13.75
1923	121,700	2426	19.11		1527	12.54	78	227	238	98	1676	13.77
1924	123,100	2328	18.91		1573	12.78	88	229	225	97	1714	13.92
1925	122,900	2174	17.69		1644	13.38	84	227	286	131	1787	14.54
1926	124,200	2160	17.39		1421	11.44	93	268	195	90	1596	12.85

Total population at all ages	117,406	At Census of 1921.
Number of inhabited houses	27,189	
Average number of persons per house..	4.31	

Area of District in acres (Land and Inland Water)............ 3,964

TABLE ID.

Causes of Death at Different Periods of Life during the Year 1926.

Supplied by the Registrar-General.

CAUSES OF DEATH.	Sex	All Ages.	0—	1—	2—	5—	15—	25—	45—	65—	75 —
ALL CAUSES	M	779	111	25	19	16	32	83	224	169	100
	F	817	85	15	16	23	36	0 4	214	163	161
1 Enteric Fever	M	...	...	..	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
2 Small Pox	M	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
3 Measles	M	...	...	...	...	...	...	...	...	...	...
	F	...		...	...	...	...	...	...	...	...
4 Scarlet Fever	M	1	...	...	1	...		...		...	...
	F	...	...	...	...	...	...	...	...	...	...
5 Whooping Cough	M	...	...	...	...	...	...	...	...	...	...
	F	1	1	...	...	...	...	...	...	...	...
6 Diphtheria	M	4	..	2	1	1	...	...	...	...	...
	F	4	...	1	2	1	...	...	...	...	...
7 Influenza	M	2	...	...	...	..	...	3	5	3	1
	F	24	...	...	...	3	1	5	7	4	4
8 Encephalitis Lethargica	M	...	...	...	...	...	...	...	...	...	...
	F	3	...	...	...	...	...	2	1	...	...
9 Meningococcal meningitis	M	1	1	...	...	...	...	...	...	...	...
	F	...	...	...	...	...	...	...	...	...	...
10 Tuberculosis of respiratory system	M	55	...	1	...	2	7	21	21	3	...
	F	47	1	...	...	1	13	21	9	2	...
11 Other tuberculous diseases	M	22	6	3	3	1	4	2	3	...	...
	F	17	1	1	3	2	3	5	2	...	...
12 Cancer, malignant disease	M	78	...	...	...	...	.	4	44	23	7
	F	89	...	...	...	1	1	13	42	27	5
13 Rheumatic Fever	M	4	..	..	...	1	2	1	...	...	...
	F	2	...	...	...	1	...	1	...	...	...
14 Diabetes	M	7	...	...	...	...	...	2	2	3	...
	F	14	...	...	...	...	1	2	8	2	1
15 Cerebral Hæmorrhage, &c.	M	34	...	...	...	...	.	2	14	12	6
	F	55	...	...	...	...	1	1	20	18	15
16 Heart Disease	M	89	..	...	...	1	1	6	31	33	17
	F	125	...	...	...	1	6	12	44	38	24
17 Arterio-sclerosis	M	65	...	...	...	...	...	1	10	29	25
	F	46	...	...	...	...	...	...	6	20	20
18 Bronchitis	M	38	4	...	...	...	1	2	10	15	6
	F	57	4	1	2	...	...		8	12	30
19 Pneumonia (all forms)	M	68	16	10	5	1	2	8	17	6	3
	F	63	7	9	2	3	4	9	14	5	10
20 Other respiratory diseases	M	9	...	1	1	1	...	2	4	...	...
	F	9	...	...	...	1	...	1	4	2	1
21 Ulcer of Stomach or Duodenum	M	6	...	...	...	...	...	3	3	...	...
	F	4	1	...	...	..	...	2	...	...	1
22 Diarrhœa, &c.	M	15	10	3	...	1	...	...	...		1
	F	15	11	...	...	1	...	...	...	2	1
23 Appendicitis and Typhlitis	M	4	...	...	...	1	1	1	.	1	...
	F	6	...	...	...	3	...	1	2	...	...
24 Cirrhosis of Liver	M	3		...	...	...	...	...	2	1	...
	F	3	...	...	...	1	...	...	2	...	...
25 Acute and Chronic Nephritis	M	24	...	...	...	...	2	4	10	5	3
	F	20	...	...	...	..	1	3	11	3	2
26 Puerperal Sepsis	M	...	...	...	...	...	...	..	...	...	...
	F	8	...	...	...	...	2	6	...		...
27 Other accidents and diseases of pregnancy and parturition	M	...	...	...	...	...	...	...	...	...	...
	F	7		...	...	...	...	7	...	...	...
28 Congenital Debility and Malformation, Premature Birth	M	46	45	...	...	...	1	...	...	...	...
	F	43	42	...	1	...	...	...	...	...	...
29 Suicide	M	9	...	...	...	...	...	...	5	3	1
	F	2	...	...	...	...	...	1	1	...	...
30 Other deaths from violence	M	31	2	1	4	2	6	6	7	1	2
	F	9	...	...	2	1	2	...	1	1	2
31 Other defined diseases	M	139	27	4	3	4	5	13	29	26	28
	F	140	17	3	4	3	1	11	31	25	45
32 Causes ill-defined or unknown	M	15	...	...	1	...	...	2	7	5	...
	F	4	...	...	...	...	...	1	1	2	...

TABLE Ie.

Number and Causes of Death in each Ward for the Year.

Cause of Death.	St. John's Ward	Avenham Ward.	Christ Church Ward.	Ashton Ward.	Maudland Ward.	St. Peter's Ward.	Moor Brook Ward.	Park Ward.	Trinity Ward.	Deepdale Ward.	Ribbleton Ward.	Fishwick Ward.	Totals.
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	1	...	...	1
Whooping Cough	...	...	1	..	...	...	...	...	...	...	...	...	1
Diphtheria, Croup	1	...	1	1	...	...	...	1	...	3	1	...	8
Influenza	7	3	3	...	4	4	3	2	3	2	3	3	37
Encephalitis Lethargica	...	1	...	...	...	...	...	...	1	...	...	1	3
Meningococcal Meningitis	...	...	...	...	1	...	...	...	...	...	...	...	1
Tuberculosis of Resp. System	8	8	8	3	8	13	7	17	9	9	8	3	101
Other Tuberculous Diseases	6	2	5	1	2	4	3	2	6	2	4	2	39
Cancer, Malig. Disease	11	5	15	11	19	22	4	16	25	23	11	5	167
Rheumatic Fever	1	1	...	...	...	...	...	2	1	...	...	...	5
Diabetes	1	2	...	2	1	2	1	1	1	1	5	3	20
Cerebral Hæmorrhage	9	8	10	7	4	8	4	12	5	12	3	8	90
Organic Heart Disease	26	12	15	11	27	20	12	21	24	28	9	14	219
Arterio Sclerosis	9	6	10	8	7	13	6	13	9	7	11	12	111
Bronchitis	11	8	12	5	3	15	2	11	6	7	10	5	95
Pneumonia, all forms	16	4	11	7	11	21	6	17	12	10	10	6	131
Other diseases of respiratory organs	1	1	1	4	1	2	3	1	...	...	...	2	16
Ulcer of Stomach or Duodenum	...	1	...	1	2	1	...	2	...	1	2	...	10
Diarrhoea & Enteritis	2	...	2	...	2	2	1	5	3	7	6	...	30
Appendicitis and Typhlitis	2	2	...	...	...	2	1	...	3	1	...	...	11
Cirrhosis of Liver	...	...	1	...	...	...	...	2	1	...	...	..	4
Acute and Chronic Nephritis	5	2	1	3	3	10	2	8	5	4	2	1	46
Puerperal Sepsis	...	2	...	...	1	1	...	1	2	...	1	...	8
Other accidents and diseases of pregnancy & parturition.	1	1	3	...	...	...	1	...	1	1	1	...	9
Congen. Debility & Malformation. Premature Birth	12	5	5	4	6	14	4	15	10	8	4	2	89
Suicide	2	...	...	2	2	1	2	...	...	...	1	1	11
Other Deaths from Violence	6	1	2	3	2	6	...	4	1	7	6	2	40
Other defined diseases	29	21	19	20	20	24	17	32	29	25	26	10	273
Diseases ill-defined or unknown	4	1	...	1	1	1	2	4	3	...	3	...	20
Totals	170	97	125	94	127	186	81	189	160	159	127	80	1596

TABLE IF.

Birth Rate, Death Rate, and Analysis of Mortality during the Year 1926.

(Provisional figures. The rates for England and Wales have been calculated on a population estimated to the middle of 1926, while those for the towns have been calculated on populations estimated to the middle of 1925. The mortality rates refer to the whole population as regards England and Wales, but only to civilians as regards London and the groups of towns.)

This Table, with the exception of the line relating to the Borough, has been supplied by the Registrar-General:—

—	Birth-rate per 1000 Total Population	Annual Death Rate per 1,000 Population									Rate per 1,000 Births		Percentage of Total Deaths		
		All Causes	Enteric Fever	Small Pox	Measles	Scarlet Fever	Whooping Cough	Diphtheria	Influenza	Violence	Diarrhoea and Enteritis (under 2 years)	Total Deaths under One Year	Certified Causes of Death	Inquest Cases	Uncertified Causes of Death
England and Wales... ...	17·8	11·6	0·01	0·00	0·09	0·02	0·10	0·07	0·22	0·47	8·7	70	91·8	7·2	1·0
105 County Boroughs & Great Towns, including London.	18·2	11·6	0·01	0·00	0·12	0·02	0·10	0·10	0·22	0·43	11·8	73	92·0	7·5	0·5
158 Smaller Towns (1921 Adjusted Popul'ns. 20.000-50,000)	17·6	10·6	0·01	0·00	0·7	0·02	0·11	0·06	0·23	0·40	6·6	67	92·6	6·3	1·1
London	17·1	11·6	0·01	0·00	0·20	0·02	0·05	0·12	0·17	0·48	11·8	64	90·6	9·4	0·0
County Borough of Preston...	**17·39**	**12·85**	**0·00**	**0·00**	**0·00**	**0·01**	**0·01**	**0·06**	**0·30**	**0·32**	**11·1**	**90**	**92·2**	**4·3**	**3·5**

TABLE Ig.

Abstract from the Registrar-General's Report.

Population, Births, Deaths, and Infant Mortality for the 52 weeks ended January 1st, 1927.

NAME OF TOWN.	Adjusted Population Mid., 1924.	Birth Rate.	Re-corded Death Rate.	Meas-les.	Scarlet Fever.	Wh'p-ing Cough.	Diph-theria.	Influ-enza.	Diarr-hœa & Enter-itis under 2 years	Deaths under 1 year to 1,000 Births.
Stockport	125,000	16.0	12.2	0.19	0.05	0.03	0.04	0.40	10.4	76
Chester	41,670	20.8	10.5	0.19	...	0.07	0.02	0.17	12.7	70
Birkenhead	155,500	21.1	10.6	0.10	0.01	0.08	0.05	0.17	28.9	82
Wallasey	91,720	15.5	10.6	0.04	0.01	0.03	0.12	0.34	9.8	59
Liverpool	856,000	23.2	13.3	0.26	0.03	0.22	0.12	0.16	25.3	103
Bootle	83,260	23.4	10.8	0.14	0.02	0.28	0.01	0.23	11.8	84
St. Helens	109,600	22.6	11.7	0.25	0.01	0.04	0.05	0.52	12.9	104
Southport	74,260	12.6	11.6	0.08	0.01	0.05	0.03	0.27	3.2	62
Wigan	91,010	19.2	12.4	...	...	0.22	...	0.24	10.9	104
Warrington	77,970	20.9	11.6	0.06	0.03	0.22	0.05	0.45	15.9	82
Bolton	180,400	15.9	13.7	0.09	0.01	0.21	0.07	0.37	15.7	101
Bury	56,700	14.7	12.0	0.05	0.02	0.16	0.19	0.23	6.0	68
Manchester	755,800	19.3	13.0	0.21	0.03	0.08	0.13	0.28	16.2	83
Salford	244,700	17.9	11.8	0.17	0.01	0.07	0.07	0.18	17.1	98
Oldham	146,200	15.8	15.2	0.13	0.03	0.32	0.12	0.68	10.0	102
Rochdale	92,190	12.7	13.5	0.12	0.04	0.10	0.04	0.42	6.0	100
Burnley	102,300	15.7	12.4	0.08	...	0.16	0.09	0.21	6.9	84
Blackburn	126,900	14.1	12.5	0.02	0.01	0.16	0.07	0.23	6.1	88
Preston	**122,900**	**17.5**	**12.8**	...	**0.01**	**0.01**	**0.04**	**0.29**	**9.8**	**90**
Blackpool	80,750	14.8	13.7	0.01	0.02	0.04	0.05	0.27	3.3	74
Barrow-in-Furness.	73,470	15.9	10.7	0.01	...	0.23	0.14	0.24	2.6	74

THE PRESTON ROYAL INFIRMARY.

A general description of the Royal Infirmary has appeared in previous Annual Reports. The following information is abstracted from the Annual Report of the Preston and County of Lancaster Queen Victoria Royal Infirmary for the year 1926 :—

The number of In-patients treated during the year was 3,967, as against 3,866 in the previous year. The daily average number of beds occupied was 223, compared with 221 ; the total days maintenance being 81,246, as against 80,636. 476 of the patients were transferred to the Lostock Hall Convalescent Hospital, where the average daily occupation of beds was 34 and the average stay of the patient 26 days.

Last year's record in the Out-patient Department has been exceeded—16,888 patients were treated (an increase of 1,516) including 6,534 Accident and Casualty cases, 2,819 Eye, Ear, Nose and Throat, 1,909 Surgical, 380 Medical, 1,774 X-Ray, 1,025 Venereal Disease, 872 Electro-Massage, 128 Artificial Sunlight, and 61 visited at home. The aggregate attendances numbered 88,987, and the prescriptions dispensed 45,000.

Expenditure.—The total expenditure of the Infirmary was £37,899 18s. 0d. of which £26,251 5s. 5d. represented Ordinary Maintenance, and £11,648 12s. 7d. Extensions, Improvements and Special Equipment.

The average costs per patient were as follows :—

	1922.			1923.			1924.			1925.			1926.		
	£	s	d.	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
Annual cost per In-Patient at Infirmary	107	18	0	102	19	0	101	18	10	103	10	3	102	14	9⅓
Weekly cost per In-Patient at Infirmary	2	1	6	1	19	6	1	19	2½	1	19	9¾	1	19	6
Cost of each In-Patient at Infirmary	6	2	10	5	7	0	5	2	4	5	0	0	4	18	0
Cost of each Out-Patient at Infirmary	0	6	3½	0	5	10	0	5	0	0	4	7	0	4	6½
Annual cost of each In-Patient at Convalescent Hospital	——			70	4	0	71	2	5	73	16	7	86	11	1¾
Weekly do. ...	1	14	9	1	7	0	1	7	4¼	1	8	9½	1	13	8
Cost of each In-Patient at Convalescent Hospital	8	8	0	5	18	0	4	1	8	4	15	10	6	5	1⅓

POOR LAW RELIEF.

Mr. Thomas H. Bentham, Clerk to the Guardians, has kindly supplied the following information.

Number of persons received from the Borough of Preston into the Fulwood Workhouse Hospital :—

	Men.	Women.	Children.	Total.
1920	229	213	66	508
1921	205	294	109	608
1922	237	256	89	582
1923	283	279	104	666
1924	329	224	76	629
1925	442	347	84	873
1926	465	344	109	918

The total amount of Out-door Relief paid in respect of the Borough was as follows :—

	£	s.	d.
1920	3055	18	0
1921	12133	16	0
1922	11692	1	7
1923	4384	12	11
1924	7253	17	1
1925	9105	8	7
1926	12137	0	6

NATIONAL INSURANCE.

Mr. Irvine R. Dearnley, Clerk to the Preston Insurance Committee, has been good enough to furnish the following information :—

" INSURED POPULATION.

The average number of insured persons in the Borough during the year ended 31st December, 1926, was 59,171. Of this number 58,464 were members of Approved Societies. These figures are an increase on those of the year 1925, which is probably accounted for by several factors : chiefly from an increasing desire on the part of insured persons on ceasing insurable employment to retain the privileges of National Health Insurance, particularly of the Widows' and Old Age Pension Benefits, rather than lapse. Also the return into insurance of many

Corporation employees who had previously been exempt. In addition to the tendency to keep in benefit already referred to there is also the natural growth in the number of insured persons.

Medical Benefit.

The total number of prescriptions dispensed by the Chemists during the year again shewed an advance over the year 1925, being 290,518 against 270,312, an increase of 20,206. This represents an average of 5.5 prescriptions for each insured person on the doctors' lists. This increase in frequency and cost is not peculiar to Preston, although the frequency rate in this Borough is still the highest of nine similar Lancashire County Boroughs. The general average frequency of these nine County Boroughs (including Preston) being 4.6 prescriptions per insured person.

The above figures do not take into account any prescriptions dispensed by the Friendly Societies' Medical Association. In the same ratio a further 10,000 prescriptions would require to be added.

The total amount of the Drug Bill in respect of the prescriptions dispensed by the chemists in 1926 was £10,730 15s. 5d., an average cost per prescription of 4s. 0½d., against 3s. 9½d. for 1925, and 3s. 11¾d. for 1924. The increase in the cost is accounted for in some small measure (not altogether) by the fact that a very wide interpretation is now placed on such Appliances as Splints, some of which have cost the Committee over £4 4s. each, and the increasing use of Autogenous Vaccines and Serums.

Medical List.

Including Assistants and the resident doctor of the Medical Association there were 60 Doctors on the Insurance Committee's List on the 31st December, 1926, an increase of nine. There were also on the List at the same date 30 Chemists' establishments within the Borough, each of which is required to have at least one fully qualified registered Pharmacist.

Testing of Medicines.

Altogether 15 tests of medicines and appliances were taken during the year under a Special Testing Scheme, and in all the cases the result of an independent analysis showed that the prescriptions were either accurately dispensed or the differences were so small as to be negligible.

Nursing Service.

The Insurance Committee have received the first Annual Report of the Preston District Nursing Association, and desire to place on record their appreciation of the remarkable success achieved by that Organisation. To have inaugurated an entirely new Service and employ six Nurses during the first twelve months is an achievement which deserves the highest commendation."

UNEMPLOYMENT.

Mr. A. Jepson, the Manager of the Employment Exchange, has been good enough to supply the following information regarding the figures relating to unemployment in Preston from April, 1926, to March, 1927 :—

1926.	Men.	Women.	Boys.*	Girls.*
April	2,239	1,934	49	57
May	3,304	1,295	204	310
June	5,356	6,347	154	272
July	3,836	2,763	115	114
August	4,480	4,164	176	226
September	4,716	4,465	134	160
October	4,521	3,770	272	342
November	4,540	3,930	137	113
December	5,068	6,302	136	141
1927.				
January	4,252	3,450	120	140
February	3,595	2,464	100	86
March	3,003	1,818	68	58

*Figures supplied by the Director of Education.

These figures are appreciably higher than those shewn in the previous year, and are mainly due to the stoppages in the cotton and engineering trades. In early 1927 a definite improvement in the state of trade was revealed in the cotton industry which has more or less been maintained up to the present. From June to December, 1926, we had a considerable volume of short-time working, and 25 mills were more or less affected by stoppages, sometimes for short periods and other times for weeks together. Although in 1927 there has been a fair amount of under employment, and a great deal of furloughing of sections of cotton operatives, in no week in 1927 have we had more than four mills entirely closed. In the case of some of these four the stoppages were primarily due to the disturbed condition in China.

Although the Engineering Trade, Electrical, General, and Textile remains in a very depressed condition, the outlook for the general trades of the district by comparison is better than twelve months ago.

The Motor Trade remains very active, and its 2,200 workpeople have been fully employed throughout the whole of the year.

The Building Industry has been fairly well placed with work, and the normal staffs fully occupied although the outlook locally at the moment is not so good as it was twelve months ago.

The firms engaged in the manufacture of rubber have on the whole been well employed. There has been no complete stoppage of any firm, but on occasions certain sections of workpeople have been furloughed.

The slipper factories whilst for a part of the year they were obliged to resort to three days a week working are now running full time with plenty of orders to execute.

The trade at the Docks has been rather of an unsatisfactory character so far as the volume of unemployment is concerned. It is, however, now improving, and reports indicate that we are now on the eve of the busy period when most of the regular transport workers will be absorbed in suitable employment.

The miscellaneous trades of the district in which are included the Lamp Works, the Hat and Cap Factories, the Soap Works, the Hosiery Works, the Undergarment Factories, have been fairly well employed, and although the Millinery, Dressmaking, and Tailoring Trades were for a period rather slack they now appear to be better placed with work, and we have few of the people who follow these trades signing our Register at the present time.

The total amount of Unemployment Benefit paid out in the months covered by this report was £250,087, or an increase of more than £100,000 on the figures of last year.

NURSING ASSOCIATION.

As related in the previous report, the Preston and District Nursing Association affiliated with the Queen Victoria Jubilee Institute for Nurses, was founded in 1925. The Nursing Home is situated in Walton's Parade, and nursing operations began on the 18th January, 1926. At the present moment the staff consists of a Superintendent and five nurses. The demands on their services are so insistent that the Committee of Management are now occupied in extending their accommodation and increasing their staff. Up to the end of 1926 a summary of the work is as follows :—

New cases	484
Total visits	10,956

The results of their work is as follows :—

Convalescents	269
Died	93
Removed to Hospital	40
Removed from books for other causes ...	36
Remaining on books	46
Operations attended	12
Total	484

326 cases were nursed entirely free.
81 paid the District fees.
41 paid part of the District patients' fees.
36 paid private patients' scale of fees.

The organisation of this Association is on sound lines, and their work fulfils a very great need.

II.—Sanitary Circumstances of the District.

WATER SUPPLY.

The water supply was described in the report for 1920. The work authorised under the Preston Corporation Act of 1921 is now in hand. The new intakes in the Langden Valley and in the Hareden Valley are completed.

The construction of the new reservoir at Longridge is progressing satisfactorily.

The following report was made by the Borough Analyst upon a sample of the town's water submitted on March 1st, 1927 :—

	Parts per 100,000.
Total solid matter in solution	7.20
Oxygen required to oxidize in 15″	0.058
Oxygen required to oxidize in 3 hours	0.104
Ammonia	0.001
Ammonia from Organic Matter by distillation with alkaline permanganate	0.003
Nitrogen as Nitrates	None
Nitrogen as Nitrites	None
Combined Chlorine	1.05
Total Hardness	3.30

The sample was clear, faintly yellow and odourless. It contained a trace of suspended matter which consisted mainly of vegetable debris with diatoms, infusoria and a few insect remains.

The sample is a good soft upland surface water, well fitted for drinking and all domestic purposes.

Reaction to litmus—alkaline.

(Signed) W. H. ROBERTS, M.Sc., F.I.C.,
Borough Analyst.

CLOSET ACCOMMODATION.

There are approximately 28,901 fresh water closets, 488 waste water closets, 14 trough closets (exclusive of those in use at Schools) and 27 privy middens, all of which latter are situated on farms and cottages in the rural parts of Ashton, Deepdale, Ribbleton and Fishwick Wards, and are not within reach of a sewer.

The sanitary conveniences in use at factories and workshops and schools are not included in the above.

SCAVENGING.

The system in force was described in the report for 1920. The work has been carried out satisfactorily. The crude refuse is tipped into a bunker and carried by means of a chain bucket to a mechanically operated revolving screen. The apertures in the first part of this screen are $\frac{7}{8}''$ diameter, and result in the removal of dust. This dust falls into a hopper, and is conveyed by means of a chain bucket to a loading hopper. The second part of the screen has $1\frac{1}{2}''$ diameter apertures, through which fall the cinders and unburnt pieces of coal. These are similarly conveyed to the second loading hopper. The remainder of the debris is carried by an endless belt to a bunker feeding the particular group of furnaces in use, on the way to which it is hand sorted, the tins, rags, and paper so removed being subjected to baling processes and made marketable.

The machinery for dealing with condemned meat, slaughterhouse refuse and fish offal consists of a bone crusher, three steam jacketed digesters, a hydro fat extractor and a pulveriser. All fumes from the cookers are led to the chimney flue. This installation has proved of great value, in that it converts waste products which were difficult to destroy into a dry powder of high food value for animals.

WORK OF THE DISTRICT SANITARY INSPECTORS.

Dwelling Houses.

The number of inspections and re-inspections are tabulated for each district :—

TABLE IIa. **Inspections.**

	Sanitary Districts					
	No. 1	No. 2	No. 3	No. 4	No. 5	Total
Inspected on Complaint	887	1093	908	786	1186	4860
Re Infectious Diseases	81	39	43	67	36	266
Housing and Town Planning Acts	81	129	110	93	119	532
Rent Restriction Act	...	...	...	...	...	...
Totals	1049	1261	1061	946	1341	5658

Re-Inspections.

	Sanitary Districts					
	No. 1	No. 2	No. 3	No. 4	No. 5	Total
Inspected on Complaint	3156	1551	1613	1682	2399	10401
Re Infectious Diseases	17	23	12	35	13	100
Housing and Town Planning Acts	...	76	130	198	62	466
Rent Restriction Act	2	...	...	...	...	2
Totals	3175	1650	1755	1915	2474	10969

These inspections and re-inspections involved the sending of 3,297 letters with regard to the common defects, i.e., yard flagging, cleansing and limewashing, and provision of dustbins. 437 Informal Notices were served in connection with the surveys under the Housing Regulations, 1910, and the Housing Act, 1925. There were also 101 Statutory Notices under the Public Health Acts served by the authority of the Council. Legal action to enforce the requirements of the Council was taken in the following instances :—

Public Health Act, 1875.

One House. Section 94 (Nuisances). Result : Order for completion of work and abatement of nuisance within one month. Work completed.

Two Houses. Owner summoned for not obeying Order made in December, 1925. Case adjourned for one week, during which time work was carried out.

Four Houses. Four Statutory Notices, Section 46 Public Health Act, 1875. Order by Court to do the work in two months, and fined 50s.

Preston Corporation Act, 1914.

Two Houses, Section 110. Owner fined 10s. and costs in each case.

The results of the work are shewn in Table IIb. 4376 houses in all have been dealt with. The improvements, repairs and alterations are multifarious and cover practically every possible kind of defect. The work done in connection with the Public Health Acts generally relating to one and only occasionally to more than one defect. That in connection with the Housing and Town Planning Act, relating as it did to the poorer class of property, dealt with a variety of defects in each individual house which were discovered during a thorough sanitary survey.

TABLE IIB.

Summary of Sanitary Improvements effected.

	Public Health Acts.						Housing and Town Planning Acts.					
	Sanitary Districts						Sanitary Districts					
	No. 1	No. 2	No. 3	No. 4	No. 5	Total	No. 1	No. 2	No. 3	No. 4	No. 5	Total
Houses dealt with :—	**1159**	**545**	**759**	**917**	**863**	**4243**	..	**8**	**78**	**45**	**2**	**133**
1 Lighting and Ventilation improved ...	8	6	49	14	14	91	..	1	61	9	..	71
2 Roofs reconstructed or repaired	53	34	132	52	53	324	..	..	23	4	..	27
3 Floors repaired or relaid	6	8	61	17	16	108	..	4	4	7	1	16
4 Fireplaces repaired or provided	22	16	13	24	21	96	..	2	7	19	..	28
5 Staircases repaired	..	1	21	3	10	35	..	..	2	8	..	10
6 Walls and chimneys pointed and repaired	35	4	137	38	76	290	..	..	34	5	..	39
7 Repairs and renewals to W.C. accommodation	204	82	64	211	328	889	..	4	5	10	..	19
8 Portable ashpails provided	349	136	170	76	201	932	..	1	17	5	..	23
9 New Sinks or other sanitary fittings...	11	5	70	18	9	113	..	1	13	9	..	23
10 Yard and lobby pavements repaired...	2	1	21	34	15	73	..	..	3	3	..	6
11 Drains tested, repaired or renewed ...	453	229	197	226	456	1561	..	1	5	1	..	7
12 Gutters and downspouts repaired or renewed	143	25	94	82	43	387	..	..	9	3	1	13
13 Provided with sufficient water supply..	18	..	20	45	27	130	..	..	2	1	..	3
14 Plasterwork and limewashing	43	12	145	120	48	368	..	7	58	33	1	99
15 General nuisances	52	10	76	117	25	280	..	3	6	8	..	17

Summary of Work done during the Year 1926.

DRAINS.

A large volume of work was done in connection with sanitary defects arising out of drains. The work done is included in the foregoing table. The inspections were as follows :—

Inspections.

	SANITARY DISTRICTS					
	No. 1	No. 2	No. 3	No. 4	No. 5	TOTAL
Street Gullies	5	...	...	...	14	19
Drains	332	1266	1029	151	973	3751

Re-Inspections.

	SANITARY DISTRICTS					
	No. 1	No. 2	No. 3	No. 4	No. 5	TOTAL
Street Gullies	5	1	...	...	...	6
Drains	754	2975	1279	494	1903	7405

FACTORIES AND WORKSHOPS.

The following tables deal with the premises registered, the number of inspections and the results of such inspections. Of the 122 defects originally found, 122 were remedied. There is very little out-working done in the Borough, the premises upon which it is carried out have been inspected frequently, and found satisfactory.

TABLE IIc.

List of Factories and Workshops on Register during the Year 1926.

		District					
		No. 1	No. 2	No. 3	No. 4	No. 5	Total
Artificial Teeth Makers		7	5	7	7	8	34
Bakers and Confectioners (Retail)		58	42	34	25	35	194
Bakers (Public)		..	2	..	1	..	3
Basket Makers		1	2	2	..	2	7
Beer Bottlers		..	3	1	1	5	10
Biscuit Makers		..	1	2	..	..	3
Boot, Shoe, and Clog Makers, Leather Curriers		31	21	30	26	22	130
Brass Founders		..	1	1	1	3	6
Breweries		..	1	1	..	1	3
Brush Makers		1	..	..	..	2	3
Cabinet Makers, Wood Carvers, Upholsterers		4	9	6	6	10	35
Coach Builders		3	2	..	5	1	11
Cotton Waste Cleaners and Dealers		..	3	..	2	..	5
Cotton Manufacturers		15	8	13	7	4	47
Coopers		1	1	2	1	..	5
Cycle Makers and Enamellers		1	6	6	4	6	23
Engravers		..	1	..	1	6	8
French Polishers		1	2	..	2	3	8
Ironfounders, Motor Engineers & Boiler Makers		9	10	5	12	9	45
Joiners, Builders, Wheelwrights, Wood Turners		18	19	6	6	11	60
Laundries		3	..	2	..	..	5
Marine Store Dealers		1	4	2	3	2	12
Milliners, Dressmakers Underclothing Manufacturers		63	49	43	38	37	230
Picture Framers, Mount Cutters, Gilders		2	1	1	1	3	8
Photographers		..	2	1	7	3	13
Plumbers, Painters		27	9	12	11	14	73
Printers, Bookbinders		..	3	..	8	16	27
Restaurant Keepers		4	25	31	4	4	68
Rope and Twine Makers		1	1	..	..	..	2
Saddlers		1	4	1	2	1	9
Smiths, Black and White, and Tinplate		5	12	5	6	10	38
Stone and Marble Masons		11	1	2	1	1	16
Sugar Boilers		1	1	..	1	2	5
Tailors		11	21	8	18	34	92
Watch Makers and Jewellers		1	9	3	6	7	26
Wire Workers		2	2	2	..	1	7
Offensive Trades	Fell Mongers	..	..	..	..	1	1
	Soap Boilers	..	..	..	1	2	3
	Fat and Tallow Melters	1	2	..	1	2	6
	Knacker Yards	1	..	..	..	..	1
	Gut Scrapers	..	1	..	..	..	1
	Tripe Boilers	1	2	2	..	..	5
Various		13	13	16	23	21	86
Total		299	301	247	238	289	1374

TABLE IID.

Factories, Workshops, Workplaces and Home-Work.

1.—INSPECTION.

Premises.	Number of		
	Inspections.	Written Notices.	Prosecutions.
Visits to Warehouses	317	2	...
Factories (including Factory Laundries)	101	12	...
Workshops (including Workshop Laundries)	1584	14	...
Workplaces (other than Outworkers' premises included in Part 3 of this Report)	759	...	...
Total	2761	28	...

2.—DEFECTS FOUND.

Particulars.	Number of Defects.			Number of Prosecutions
	Found.	Remedied.	Referred to H.M. Inspector.	
Nuisances under the Public Health Act :—				
Want of Cleanliness	13	13	...	
Want of Ventilation	5	5	...	
Overcrowding	...	...	...	
Want of drainage of floors	28	28	...	
Other Nuisances	38	38	...	
Sanitary accommodation — insufficient	18	18	...	
Sanitary accommodation — unsuitable or defective	20	20	...	
Sanitary accommodation — not separate for sexes	...	...	...	
Offences under the Factory and Workshop Act :—				
Illegal occupation of underground bakehouse (s. 101)	...	...	...	
Breach of special Sanitary requirements for bakehouses (s.s. 97 to 100)	...	...	...	
Other offences (excluding offences relating to outwork which are included in Part 3 of this Report)	...	...	...	
Total	122	122	...	...

TABLE IIE. HOME WORK.

NATURE OF WORK.	OUTWORKERS' LISTS, SECTION 107.									OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES. SECTIONS 109, 110.		
	Lists received from Employers.						Notices served on Occupiers as to keeping or sending Lists.	Prosecutions.							
	Twice in the Year.			Once in the Year.											
	Lists	Outworkers.		Lists.	Outworkers.			Failing to keep or permit Inspection of Lists.	Failing to send Lists.	Instances.	Notices served.	Prosecutions.	Instances.	Orders made (S. 110)	Prosecutions (Sections 109, 110).
		Con-tractors.	Work-men.		Con-tractors.	Work-men.									
Wearing Apparel:—															
(1) making, &c.	13	4	17	1	...	...	...	...	...	...	...	...	...	...	...
(2) cleaning and washing	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total	26	8	34	1	...	...	...	...	...	...	...	...	...	...	...

4.—REGISTERED WORKSHOPS.

Workshops on the Register (s. 131) at the end of the year.	Number.
Factories	194
Workshops	913
Workplaces	69
Retail Bakehouses	195
Public do.	3
Total number of Workshops on Register	1374

5.—OTHER MATTERS.

Class.		Number.
Matters notified to H.M. Inspector of Factories:—		
Failure to affix Abstract of the Factory and Workshop Act (s. 133) 1901 ...		...
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5). 1901	Notified by H.M. Inspector	15
	Reports (of action taken) sent to H.M. Inspector...	15
Other		48
Underground Bakehouses (s. 101):—		
Certificates granted during the year		...
In use at the end of the year		...

TABLE IIf.

Summary of Work done under the Factory and Workshop Act during the Year 1926.

	No. 1 District.	No. 2 District.	No. 3 District.	No. 4 District.	No. 5 District	Total.
Number of Factories and Workshops on Register	299	301	247	238	289	1374
,, Circular Letters sent re Out-workers	...	27	...	...	...	27
,, Out-workers reported	...	34	...	...	...	34
Visits to Factories and Workshops	328	531	121	136	285	1401
,, Retail Bakehouses	49	180	6	22	5	262
,, Public Bakehouses	...	18	...	4	...	22
,, Home-workers premises	2	28	...	...	...	30
Drains tested	2	...	10	...	12	24
DEFECTS FOUND AND REMEDIED :—						
Defective Drains	2	4	10	...	12	28
,, Slopstone Pipes	...	...	...	...	...	...
,, Spouts and Roofs	...	1	2	1	1	5
,, Water Closets	...	1	10	...	12	23
,, Yard Pavement	2	...	...	...	...	2
Limewashing required	...	...	...	10	8	18
General Nuisances	4	2	2	1	3	12
Insufficient W.C. accommodation for Females	...	...	2	1	...	3
Insufficient W.C. accommodation for Males	...	1	...	...	1	2
No receptacle for refuse	...	...	2	1	...	3
Manure Accumulations	...	...	15	11	...	26
Overcrowded	...	...	...	...	...	...

Total defects found, 122; remedied, 122.

OFFENSIVE TRADES.

The following offensive trades are established in the Borough :—

Fell Monger, 1 ; Soap Boiler, 3 ; Fat and Tallow Melter, 6 ; Knackers Yard, 1 ; Gut Scraper, 1 ; Tripe Boiler, 5 ; Fish Fryers.

All these premises are subject to frequent inspection. 1,077 Visits were paid during the year and one nuisance was remedied. The conditions are as satisfactory as the nature of the trade will allow.

PIG KEEPING.

There are 19 Pig Keepers in the Borough, of whom nine are Farmers. The total number of pigs kept is 81. A reduction of 98 compared with 1915.

The sanitary conditions, especially those relating to the distance from inhabited dwellings, drainage, conditions of floors and buildings, and means of temporary storage of manure are satisfactory. 42 Visits were made to the premises.

COMMON LODGING HOUSES.

There are 36 Common Lodging Houses on the register, two having been registered during the year. The accommodation consists of 927 beds in 248 rooms. The average number of lodgers per night is 644. The premises are visited regularly (3,405 visits have been paid) by the Sanitary Inspectors. Many of these houses are ancient and are difficult to maintain in a sanitary condition. The accommodation for women has been the subject of a recent report to the Health Committee, the main defects reported on being lack of accommodation for personal ablutions, for storage of personal effects, adequate screening of the rooms occupied by women and means of escape from fire.

The bye-laws made by the local authority under Section 80 of the Public Health Act, 1875, for :...

1. Fixing number of lodgers and separation of sexes.
2. Promoting cleanliness and ventilation in such houses.
3. Giving of notice and taking precautions in case of Infectious disease, and
4. The general well ordering of such houses,

have been carried out.

HOUSES LET IN LODGINGS.

Of the 36 Common Lodging Houses on the register, 19 have been used for some considerable time as Houses Let in Lodgings. Being on the register they are subject to the bye-laws in force for Common Lodging Houses. In addition to these there are 18 houses which are let off entirely as houses let in lodgings. The occupancy varying from one to three rooms.

Model bye-laws suggested by the Ministry of Health under Section 90 of the Public Health Act 1875, have been brought to the notice of the Committee. The subject is still under consideration.

THE RAG FLOCK ACT.

No samples have been taken. No rag flocks are sold in the Borough.

RATS AND MICE DESTRUCTION ACT.

The advice of the Department was sought by proprietors of infested premises on numerous occasions. Buildings were inspected as follows—

Factories	5
Food Preparing Premises	2
Groups of Dwelling-houses	75

In 80 instances the cause of the invasion was found to be defective drains. In each case the possibility of further infestation was removed by the execution of the necessary repairs. In these operations over 929 rats were destroyed.

During the year special attention was paid to the rat infestation at the Knackers Yard. 50 rats were accounted for.

In the last two years' reports mention is made of a bone dealer's premises where a large number of rats were caught. At these premises the rat catcher has been engaged under an annual contract to keep the premises clear of rats, this work being a continuance of the previous two years' activities. The number of rats caught on these premises alone is 1,919, and the effect of the work has been to cause a noticeable drop in the number of premises in the respective localities reporting infestation.

The necessary inspections and supervision of the work entailed called for 234 visits of the staff.

STABLE PREMISES AND GARAGES

Have been the subject of 214 visits. As a result three stables have been abolished, 22 have been cleanesd, three new drains installed, covers to middens in five instances, two old middens abolished, pails have been substituted, and arrangements made with the Cleansing Department to remove periodically, 20 offensive accumulations abolished, and two structural repairs carried out.

THEATRES AND CINEMAS.

In 16 Theatres and Cinemas, of which two are used for theatrical performances, and the remainder as cinemas, the seating is as follows :—

Cinemas, 14.	Total Seats, 12,962.
Theatres, 2.	Total Seats, 4,452.

In accordance with the regulations issued by the Ministry, Circular 120, 25/8/20, each place of entertainment has been visited and a certificate issued to the proprietor for presentation to the Licensing Authority, who require such certificate before they can grant the licence. This certificate must state that the premises are satisfactory in sanitary and other respects. Special attention has been paid to ventilation, cleanliness, condition of the dressing rooms and, in the case of picture houses, the proximity of the front seats to the screen. The standard laid down in the Interim Report of the Joint Committee on Eyestrain in Cinemas appointed by the Illuminating Engineering Society in October, 1919, which has been adopted, was given in the report for 1921.

In two cases cinemas were unsatisfactory as regards ventilation, and have been improved.

During the year the District Inspectors paid 79 official visits to places of entertainment.

SHOPS ACTS 1912 and 1913.

The administration of these Acts was transferred to the Police on January 1st, 1924.

VANS.

The number of vans used as permanent residences in the Borough is approximately 44. They are under constant supervision. Owing to the difficulty in obtaining housing accommodation it has been sufficiently satisfactory if the van dwellers were provided with water, means of disposal of refuse and could secure the use of closet accommodation. During Whit-Week Fair 47 vans visited the town and were stationed in and about the Market Place. They housed approximately 130 persons. Special arrangements made on their behalf included the daily cleansing of the ground in the early morning by the Cleansing Department and the disinfection of the area. Water supply was specially provided by the Water Department and use made of the public sanitary conveniences in Earl Street, Birley Street and Church Street. During the week the Sanitary Inspectors visited the vans daily and made enquiries as to the health of the inmates. Four hundred and seventy-one such visits were made.

Whilst these vans are occupied by respectable and responsible persons it is necessary to say that their presence in the centre of the town raises special sanitary problems which would become acute in the event of an outbreak of dangerous infectious disease.

MISCELLANEOUS.

In addition to the work under the foregoing heads, a large volume of inspection under miscellaneous heads was carried out. These were :—

Tents and Vans	186 visits.
Offensive Accumulations	20 visits.
Animals so kept as to cause a nuisance ...	6 visits.

SMOKE OBSERVATIONS.

The question of the reduction of the permissible limit of Black Smoke was unsuccessfully brought before the Committee in 1922.

There are approximately 135 chimneys in the Borough, and observations have been made upon 56 of them. giving 385 half-hour observations during the year.

The attached chart " A " shews the rise and fall of the monthly averages of black and moderate smoke, the number of observations on which the averages are based being given at the foot of the monthly columns. For comparison, the chart also deals with the years 1924 and 1925.

Chart " B " gives in graphic form the results of observations on a chimney of a textile factory for 12 months. in which are included six months' coal stoppage. The frequency of the observations was due to the fact that this chimney has always been difficult from the smoke emission point of view. The rise in the amount of black smoke as the fuel deteriorated is clearly seen. During the latter part of the period black smoke was thrown out in enormous quantities for practically the whole of the working period. Later, the change over to oil fuel resulted in the chimney giving off dense black smoke for the whole time the factory was operating.

In general, the results of the observations are extremely unsatisfactory. The effects of the pollution of the atmosphere with sooty particles and grit are deleterious to both persons and things. Not the least serious effect of atmospheric pollution is the cutting off of the natural sunlight which is so necessary for the growth of children.

The Public Health (Smoke Abatement) Act, 1926, which comes into force on July 1st, 1927, should improve matters in that the sending forth of smoke in such quantities as to be a nuisance, may be dealt with as a nuisance notwithstanding that the smoke is not black smoke. Also the expression smoke is to include soot, ash, and grit. Penalties are increased and local authorities are given power to make bye-laws for the further control of smoke abatement. A very helpful provision is the power to include in building bye-laws a bye-law requiring the provision in new buildings, other than dwelling houses, of such arrangements for heating and cooking as are calculated to prevent or reduce the emission of smoke.

Much is hoped from the operation of this Act.

Among our chimneys, observations of more than five minutes black smoke were noted in 73 instances. These were duly reported to the Committee and statutory notices served in three instances. There have been no prosecutions.

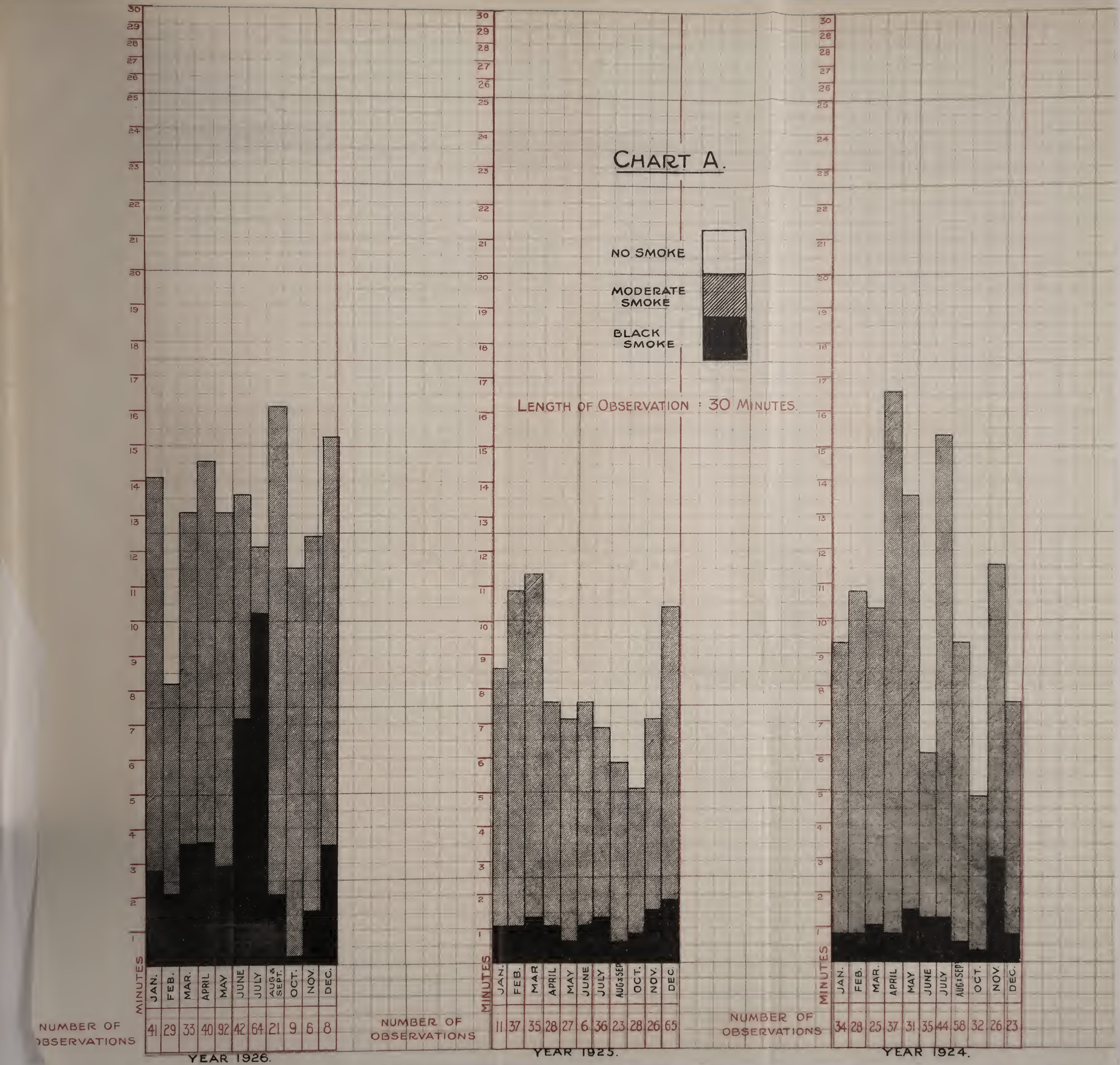
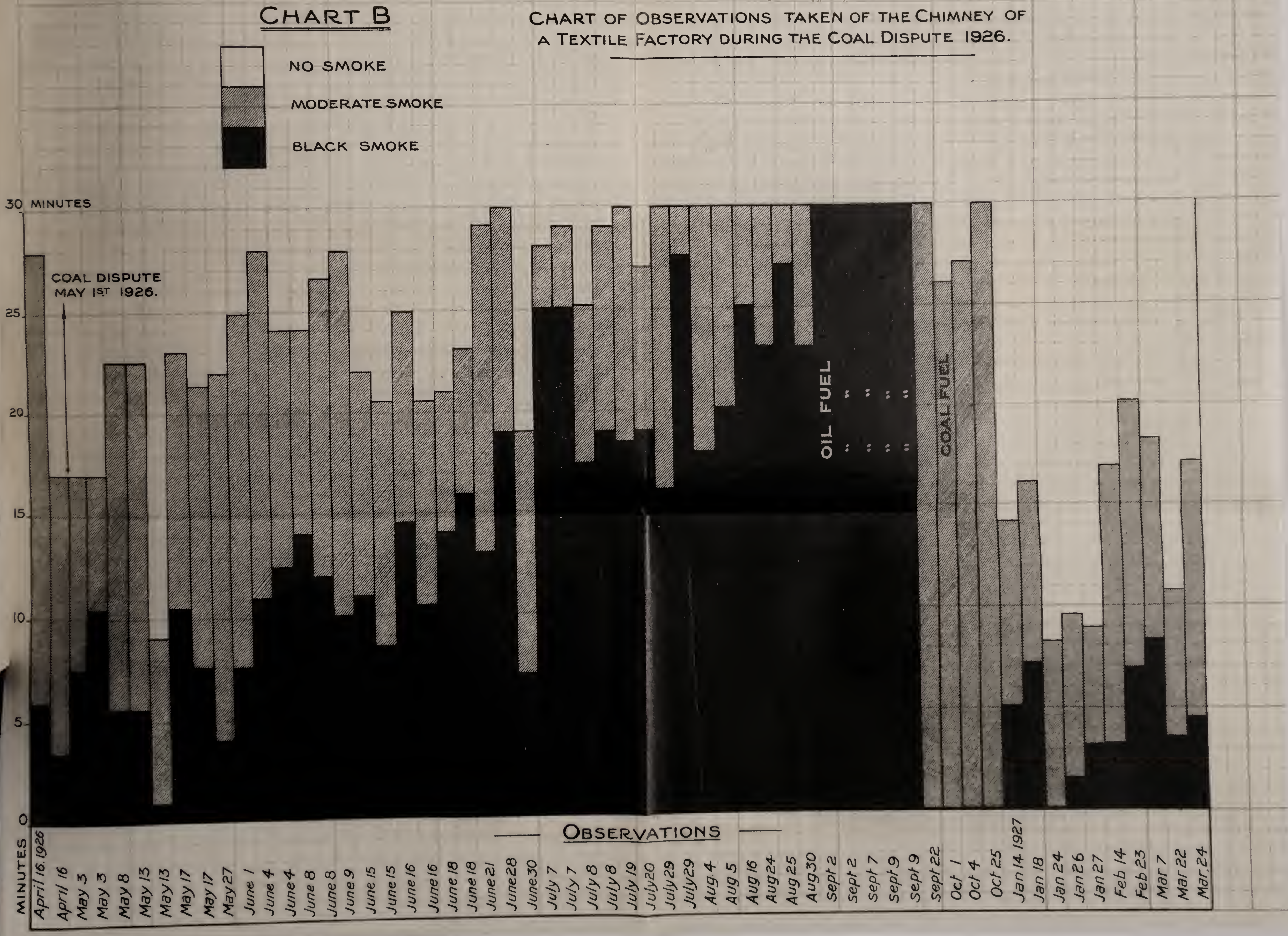
CHART A.
NO SMOKE
MODERATE SMOKE
BLACK SMOKE
LENGTH OF OBSERVATION : 30 MINUTES.
MINUTES
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
JAN.
FEB.
MAR.
APRIL
MAY
JUNE
JULY
AUG & SEPT.
OCT.
NOV.
DEC.
NUMBER OF
BSERVATIONS
41 29 33 40 92 42 64 21 9 6 8
YEAR 1926.
NUMBER OF OBSERVATIONS
11 37 35 28 27 6 36 23 28 26 65
YEAR 1925.
NUMBER OF OBSERVATIONS
34 28 25 37 31 35 44 58 32 26 23
YEAR 1924.

CHART A



DISINFECTION.

The Disinfectors are responsible for the disinfection of premises after infectious disease and after death from tuberculosis or change of address of persons suffering from tuberculosis. The work is summarized below :—

TABLE IIg.

	District No. 1	District No. 2	District No. 3	District No. 4	District No. 5	Total
Beds	101	60	71	58	35	325
Mattressses	120	17	33	29	11	210
Bolsters	214	73	102	82	45	416
Pillows	408	183	167	164	99	1021
Other items of Bedding, etc.	221	127	153	151	74	726
Houses	162	126	151	119	113	671
Rooms	161	145	182	149	119	756
Schools	2	1	...	...	...	3
Institutions	4	...	...	...	...	4
Jumble Sales	6	13	5	16	9	49
Vehicles	...	1	...	...	...	1
Books	63	54	41	21	19	198

REPORT ON THE ADMINISTRATION OF THE CANAL BOATS ACTS, 1877 and 1884.

The records show 58 Boats have been registered, 29 of which have been cancelled, leaving 29 on the Register. Most of the boats were laid up at this end of the Canal during the coal dispute. Advantage was taken of this to have a number of them painted and repaired. Eleven infringements of the Regulations were found and these were promptly dealt with on informing the owners.

On inspection the boats were found in a fairly satisfactory condition. The crews of the boats were very willing to do all in their power to keep them in a cleanly state.

No case of Infectious Disease was reported during the year.

The work of inspection has been carried out by Inspector W. Baron in addition to his other duties as Port Sanitary Inspector. No special remuneration being provided for this part of his work.

The following table shows the details of Occupation and Inspection during the past ten years :—

	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926
No. of Inspections ...	113	121	124	111	219	288	46	189	194	293
Males in Occupation ...	67	115	129	98	311	39	26	36	30	27
Females in Occupation...	33	50	57	47	149	15	14	14	13	9
Children in Occupation	25	40	27	41	56	7	5	6	5	2

PORT SANITARY ADMINISTRATION.

TABLE IIh.

Amount of Shipping entering the Port Sanitary District during the Year 1926.

		Number	Tonnage	Number Inspected		Number reported to be defective	Number of Orders Issued
				By the Med. Officer of Health	By the Sanitary Inspector		
Foreign	Steamers	294	261390	40	269	61	61
	*Motor	...	...	...	...	...	...
	Sailing	1	365	1	1	...	...
	Fishing	...	...	...	...	...	...
Total Foreign ...		295	261755	41	270	61	61
Coastwise	Steamers	658	133577	12	549	173	173
	*Motor	14	3600	1	14	...	...
	Sailing...	16	1367	4	16	...	...
	Fishing	...	...	...	...	...	...
Total Coastwise ...		688	138544	17	579	173	173
Total Foreign and Coastwise ...		983	400299	58	849	234	234

*Includes mechanically-propelled vessels other than steamers.

TABLE IIi.

Rats destroyed by dogs, traps and ferrets, and number of Baits set for destruction of Rats in 1926.

Number of	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov	Dec.	Total In Year
Brown Rats	80	34	27	57	42	49	106	67	74	54	63	29	682
Grey Rats	21	23	28	48	43	48	65	52	38	36	42	28	472
Rats examined .	...	...	...	...	...	...	...	...	...	...	...	...	...
Rats infected with Plague...	...	...	...	...	...	...	...	...	...	...	...	...	...
No. of Baits set.	1230	1240	1420	1390	1570	1260	2010	1660	1350	1310	2150	1170	17760

TABLE IIJ.

Report of Port Sanitary Work for the Year 1926.

Foreign	Steamships Inspected	269
	Sailing Vessels Inspected	1
	Motor Boats Inspected	...
	Re-Inspections	205
Coastwise	Steamships Inspected	549
	Sailing Vessels Inspected	20
	Motor Boats Inspected	14
	Re-Inspections	210
Condition of all Vessels Inspected	Good	619
	Defective	234

DEFECTS REMEDIED.—

Forecastle re-painted	8
Do. cleansed	137
Dirty Lockers, Washhouses, Store Rooms, etc. cleansed	204
Foul Water Tanks cleansed	92
Do. and defective W.C.'s cleansed and repaired	137
Accumulations of Offensive Refuse removed	43
Damp Quarters remedied	3
Leaky Decks overhead caulked	3
Defective Port-lights, Sky-lights, and Dead-lights remedied	5
Defective Lavatories and Waste Pipes repaired	...
Do. Stove Replaced	...
Dirty Galleys Cleansed	43

The Chief Imports.	Source.	The Chief Exports.	Destination.
Wood Pulp	Canada, Germany, Sweden, Norway and Finland.	General Coal and Coke	Dublin & Belfast. Ireland.
Timber	Canada, Norway, Russia, Roumania, Germany, Sweden and Finland.		
Stone	Norway, Wales & Scotland.		
China Clay	Cornwall.		
Potatoes	Ireland.		
Live Stock	Dublin.		
Esparto Grass	Oran & Azew.		
Cement	London.		
General	Sweden, Belfast, Dublin, Germany, and Norway.		
Whiting	London and Cornwall.		
Motor Spirit	London and Texas via Amsterdam.		
Slates	Wales.		
Roof Tiles	France.		
Coal, Coke and Briquettes	Germany, Belgium. Holland.		

In addition to the measures of rat destruction as set forth in Table III., it should be stated that the Port Sanitary Authority employ a whole-time rat catcher, who acts under the instruction of the Port Sanitary Inspector, W. Baron, himself a whole-time officer. Every foreign ship is visited by the rat catcher. and dealt with according to the necessity of the case. The methods used are trapping by cage and spring traps, rat-catching varnish, poisoning by phosphorus, squills, barium carbonate, etc., and killing by ferrets and dogs. Judging by the number of baits set it is estimated that a total number of 8,330 rats were destroyed in the year, of which 276 rats were caught in traps on ships arriving from foreign ports. The net total rats caught is 1,154.

Precautionary measures were taken for the destruction of Mosquitos and the larva both on the Dock and the lands adjoining. The measures taken were cleaning and clearing of weeds, etc. ,from stagnant pools and ditches. and then spraying periodically throughout the summer with paraffin and sulphate of copper.

Public Health (Unsound Food) Regulations, 1907.

List of Imported Articles Inspected.

Wheat Barley Flour Oatmeal Sugar Nuts
Herrings Sardines Brislings Beef Pork Mutton
Margarine Potatoes.

List and Weight of Articles Condemned and Destroyed.

	Tons.	Cwts.	Qrs.	Lbs.
Beef	1	5	1	22
Mutton	0	0	1	2

THE PRESTON (SHELL FISH) REGULATIONS, 1923.

These Regulations forbidding the picking of Mussels for human food, in the estuary of the River Ribble, came into force in October, 1923. Since then placards have been posted in prominent places on both sides of the River and at Preston. The placards and notices were renewed during 1926. All the fishermen on both the north and south sides of the River and at Preston have been served with a copy of the Notice. The mussel beds have been visited regularly by Inspector William Baron, who paid 7 visits to these beds during 1926.

It was suspected that mussels were being brought up the River from Lytham, and plain clothes constables were put on duty to assist Inspector Baron, as a result of this 17 2-cwt. bags of mussels were seized and destroyed.

III.—Food.

By R. FINCH, F.R.C.V.S., D.V.S.M.

MILK SUPPLY.

Milk retailed in the Borough amounts approximately to 6,190 gallons daily, or eight ounces per head per day, compared with 6,150 gallons daily in 1925.

12 Cowkeepers in the Borough produce 387 gallons and retail	560 galls.
67 Dairies in the Borough retail	2322 ,,
9 Resident Kitters in the Borough retail	267 ,,
27 " Mixed Business " shops retail	461 ,,

Eighty-four dairy farmers outside the Borough produce and retail 2,580 gallons.

There are 19 purveyors of sterilized bottled milk.

Cowkeepers in the Borough are producing daily 113 gallons less and retailing daily 70 gallons of milk less than the previous year. Dairies in the Borough retail about 700 gallons more than the previous year.

Resident kitters in the Borough who are reduced in number from 33 to nine, are retailing 267 gallons, as against 990 gallons in 1925.

Mixed shops are increased in number by two and are selling 461 gallons, as against 275 gallons in 1925.

There are 84 dairy farmers outside the Borough producing and retailing as against 94 in 1925.

The above summary also shows that there is a considerable reduction in the number of resident kitters, nine as against 33. On the other hand there is an increase in the number of dairies in the Borough, viz., 67 as against 36.

The figures as to the amount of milk sold are based upon estimates provided by the traders concerned. They are approximate only.

The supervision of the milk supply necessitated the following work :—

Visits to Dairies, Cowsheds and Milkshops in the Borough :

By Veterinary Officer	68
By Sanitary Inspectors	310

Number of cattle examined by Veterinary Officer :

In the Borough	626
Outside the Borough	351

Number of samples of milk taken for examination :

	1923.	1924.	1925.	1926.
(a) For Tubercle Bacillus	51	229	291	174
(b) For contamination by dirt ...	154	304	204	133
(c) Under the Foods & Drugs Acts	133	9	81	126

Tuberculosis and the Milk Supply.

The policy of frequent sampling for examination for the presence of the tubercle bacillus in milk has been continued. A total of 137 samples were taken from the various sources of supply by the Inspectors during the process of transit and delivery. The biological examination of these samples resulted in 12 market samples being found to contain the bacillus tuberculosis. A veterinary investigation of the premises on which these milks were produced necessitated a further 37 samples being taken. Sixteen farms were visited and all the cows producing milk on these farms were clinically examined. It was found that 12 cows were affected with tuberculosis of the udder. These animals were removed and slaughtered under supervision.

The following table shows the percentage of market milks found to be infected with the bacillus tuberculosis during the past four years :—

MARKET MILK (Mixed Samples.)

	1923.	1924.	1925.	1926.
Number of samples examined	51	162	235	137
Number bacillus tuberculosis found ...	9	19	14	12
Percentage	17.67	11.73	5.99	11.41

The percentage for this year is greater than that of the previous year; but the point to be emphasised is not that this method of discovering tuberculous milk supplies will ever result in the complete freedom from such contamination, but that the frequent and persistent sampling of all sources of supply will result in the early detection of this condition and its prompt elimination when so discovered. One farm sending in tuberculous milk for a prolonged period would have just as serious consequences as 12 farms supplying such milk for short periods. The safest and quickest method of removing such milk from the market is by discovering its condition as soon as possible by frequent biological examination.

Further steps have also been taken by the Ministry of Agriculture in issuing the Tuberculosis Order, 1925, and the Ministry of Health in putting into operation the provisions of the Milk and Dairies (Consolidation) Act, 1915. Extracts of these orders have been circulated to the milk producers, and the milkshops and dairies inside the Borough.

It has been the practice hitherto for the Borough Veterinary Officer to visit farms outside the Borough in making the "follow up" investigations mentioned above. The recent Milk and Dairies Order, 1926, now places the responsibility on the Local Authority (County Boroughs and County Councils) in whose area the farms are situate. Under the present system the two Authorities work in close collaboration; the one discovering the mixed market milk infected by bacillus tuberculosis, the others following up and eliminating by veterinary investigation the animals responsible.

Until uniform veterinary inspection of all milking cattle is established throughout the country, the safeguarding of the milk supply from tuberculosis can only be partially effected by the continuous and frequent sampling as practised in the Borough.

EXAMINATION FOR THE APPROXIMATE AMOUNT OF BUTTER FAT AND MANURIAL CONTAMINATION.

This examination is carried out by your Veterinary Officer in the Laboratory. One hundred and thirty-three samples of milk were examined, and 39 of these were found to be unsatisfactory. The following table compares the samples examined under this heading with those of previous years.

	1923	1924	1925	1926
Number of Samples examined	154	304	204	133
,, ,, unsatisfactory	72	79	77	39
Percentage of Samples unsatisfactory	46.7	26.0	37.74	29.32
Samples classified as unsatisfactory offended in one or more of the following particulars :—				
Manurial Contamination	66	74	47	32
Discoloured or bad odour	—	22	11	15
Premature souring	6	7	13	1
Deficient in fat	—	1	6	7

BACTERIAL CONTAMINATION.

In addition to the biological examination for the bacillus tuberculosis made by the Public Health Laboratories of the Liverpool and Manchester Universities a microscopical examination and count is made to ascertain the presence of the colon bacillus, the bacillus enteritidis sporogenes and allied organisms whose normal habitat is manure. Ninety-six samples were examined during the year, and 34 of these showed freedom from any contamination whatsoever. Six showed contamination of such a degree that warranted a notification being sent to the producers or retailers.

Colon bacilli found present in the following dilutions of a cubic centimetre—

Cols. 1	2	3	4	5	6
1 cc.	1/10 cc.	1/100 c.c.	1/1000 c.c.	1/10000 cc.	1/100000 cc.
19	19	11	8	2	3

Streptococci	Bac. Enteritidis Sporogenes	Free from contamination in any dilution
1	3	34

The interpretation of the above table indicates in cols. 1, 2, 3, slight unavoidable contamination; in col. 4 avoidable contamination, and in cols. 5 and 6 serious contamination. The presence of streptococci and the bacillus enteritidis in any of the above dilutions is also considered to indicate heavy manurial pollution or some disease of the udder.

Increasing knowledge on the part of those engaged in the milk trade and a rising standard in the public demand, combined with reasonable legislation as prescribed in the Milk and Dairies Order, 1926, all tend towards the production of cleaner and more wholesome milk.

The Public Health Department, by circulars to producers and retailers of unsatisfactory or contaminated milk, and by my personal visits of inspection, has assisted the milk traders to improve the conditions of production and distribution; and as far as possible the regulations have been carried out harmoniously. Prosecutions have not been necessary. The cordial co-operation of responsible officers of the districts, outside the Borough, in which the milk is produced has been a prominent feature of the year's work and in this connection I would particularly like to mention the name of Colonel C. J. Trimble, the Medical Officer of Health for the Preston Rural District, whose advice, assistance and co-operation have always been at our disposal.

CONTAGIOUS DISEASES OF ANIMALS ACTS.

The Diseases scheduled under the above Acts are :—

- Anthrax
- Foot and Mouth Disease
- Parasitic Mange (Horses)
- Epizootic Abortion (Cattle)
- Rabies
- Sheep Scab
- Swine Fever
- Cattle Plague
- Pleuro-Pneumonia
- Sheep Pox
- Epizootic Lymphangitis
- Glanders and Farcy
- Tuberculosis (Cattle)

The administration of the various Orders necessitated the inspection of all live animals at the Cattle Market and Saleyard, also the inspection of all cattle in the cowsheds in the Borough. The number of visits and the number of animals inspected is as follows :—

Visits to Cattle Market and Saleyard	160
Visits to other premises	68

Number of animals inspected at :—	Cattle	Sheep	Pigs	Calves	Horses
Cattle Market ...	31937	85683	16095	11486	1479
Other Premises ...	626	40	...	...	37
Total	32563	85723	16095	11486	1516

ANTHRAX.

One suspected case of anthrax was reported in a pig, but investigation proved this to be negative.

Two outbreaks of anthrax occurring in the vicinity of the Borough, implicating a knacker's cart and a butcher, necessitated steps being taken to secure proper disinfection of the persons and utensils concerned.

FOOT AND MOUTH DISEASE.

During the year there have been, in the whole country, 208 outbreaks confirmed, 20,170 animals being slaughtered as diseased or exposed to infection. These figures compare with the three previous years as follows :—

	Outbreaks Confirmed	Slaughtered as diseased or exposed to infection
1926 ...	208	20170
1925 ...	255	19692
1924 ...	1515	88850
1923 ...	1854	125098

Foot and mouth disease outbreaks occurred on January 8th in the Blackburn area; on January 16th, Bolton area became involved; January 23rd, Salford; and on January 31st Walton-le-Dale and Grimsargh were scheduled as infected areas.

The disease on February 2nd made its appearance in the Lancaster district; Manchester and Salford became infected areas on February 6th, and from that time no further outbreaks occurred and restrictions were eventually withdrawn. On September 10th, 20th, 29th and 30th, Orders declaring St. Helens, Bootle, Widnes and certain areas in the counties of Lancashire, Cheshire, Flint, and Denbigh as infected areas were again put in force. In consequence of these outbreaks the Cattle Market was closed from January 1st to 18th, except for the sale of fat stock for immediate slaughter, and again from September 14th to 22nd. The disease never established itself in the Borough, and in that way the Cattle Market was saved from more burdensome restrictions and prolonged closure.

As a result of recent scientific investigation the following important orders dealing with the methods of control of foot and mouth disease have been issued :—

1.—Salvage of carcases has been dispensed with to facilitate speedy eradication of infection.

2.—Movement of Animals (Records) Order, operating from February 1st. This compels the owner of stock to keep a record of the movements of his animals.

3.—Importation of Carcases (Prohibition) Order of 1926. Operative from June 2nd, prohibits the landing of carcases and certain animal products from the continent of Europe; except dried hides and skins, and cured bacon and ham.

4.—Foot and Mouth Disease (Amendment) Order, 1926, dated September 24th, put additional restrictions on infected premises and persons.

5.—Foreign Hay and Straw Order, January 19th, prohibits the use of same for animals.

PARASITIC MANGE.

One case reported involving one animal only. Restrictions put in force from January 1st to February 10th, when they were withdrawn.

RABIES.

A suspected case of rabies was investigated with negative results.

TUBERCULOSIS (IN CATTLE).

Under the Tuberculosis Order, 1925, ten suspected cases of tubercular cows in the Borough area were reported and investigated. The following table shows particulars of these :—

	Total No. of Animals reported as diseased	No. giving T.B. Milk	No. with T.B. emaciation	Otherwise affected	No. not affected
Cows in Milk ...	9	2	...	2	5
Other Cows and Heifers ...	1	...	1	...	...
Total ...	10	2	1	2	5

The five animals affected were dealt with under the terms of the Order, and compensation amounting to £26 0s. 0d. was paid to the owners. Of this amount three-quarters was recoverable from the Ministry of Agriculture. Total net salvage amounted to £6 15s. 0d.

In addition, 40 animals were sent in on license from the surrounding Local Authorities to be slaughtered under the terms of the Tuberculosis Order, 1925. As the result of regular inspection, a further 29 animals were removed from the Cattle Market by order of your Veterinary Officer. Of these animals 18 were slaughtered in the Borough, and 11 were returned to the premises from which they came to be dealt with by the Local Authorities concerned. Many of these carcases were condemned for tuberculosis and surrendered as unfit for food. Particulars of these are included in the tables given in the meat inspection returns.

Swine Fever.

No actual cases of this disease were reported during the year. In order to prevent the spread of swine fever through infected pigs coming into the market, the proper disinfection of vehicles and pens has been supervised, and inspection of the animals is carefully carried out.

Epizootic Abortion.

No cases of this disease have been discovered exposed in the market. Posters drawing attention to the losses incurred by farmers through this disease have been renewed from time to time.

Sheep Scab.

One case of sheep scab was reported involving 55 sheep. The premises remained under control at the end of the year.

There were no suspected or confirmed cases of the following diseases in the Borough :—

Cattle Plague
Epizootic Lymphangitis
Glanders or Farcy
Pleuro-Pneumonia
Sheep-pox

Orders issued by the Ministry of Agriculture and Fisheries.

In addition to the many Foot and Mouth Disease Orders relating to the movement of animals, issued during the year, and to the miscellaneous orders of the Ministry already in force, the following is a list of new Orders which it is incumbent of the Local Authority to execute and enforce :—

Date of Operation.	
Jan. 19.	Foot and Mouth Disease (Packing Materials) (Amendment) Order of 1926.
Feb. 1.	Movement of Animals (Records) Order of 1925.
,, ,,	Diseases of Animals (Disinfection) Order of 1925.
,, ,,	Markets, Sales and Lairs Temporary Order of 1926.

Date of Operation.	
April 15.	Foreign Hay and Straw (Amendment) Order of 1926.
May 15.	Sheep Dips (Regulation) Order of 1926.
June 1.	Sheep Scab (Regulation) Order of 1926.
,, 4.	Importation of Carcases (Prohibition) Order of 1926.
,, 12.	Importation of Carcases (Prohibition) (Amendment) Order of 1926.
,, 16.	Importation of Carcases (Prohibition) (Amendment) Order of 1926 (No. 2).
July 1.	Diseases of Animals (Disinfection) Order of 1926.
,, 1.	Cleansing and Disinfection to the above Order.
,, 1.	Markets, Sales and Lairs (Amendment) Order of 1926.
,, 2.	Amendment to the Foreign Animals Order of 1910.
,, 5.	Importation of Carcases (Prohibition) (Amendment) Order of 1926 (No. 3).
Aug. 9.	Animals (Transit and General) (Amendment) Order of 1926.
Sept. 15.	Importation of Dogs (Amendment) Order of 1926.
Oct. 1.	Importation of Carcases (Prohibition) (Amendment) Order of 1926 (No. 4).

IMPORTATION OF LIVE STOCK FROM IRELAND.

The following figures shew the number of animals landed during the year as compared with those of the two previous years :—

	Cattle	Sheep	Pigs	Asses	Goats
1926	18934	30547	327	...	...
1925	18726	28780	107	3	1
1924	25817	44223	690	...	...

The number of those which had to be slaughtered for emergency reasons is as follows :—

	Cattle	Sheep	Pigs
1926	23	578	2
1925	9	307	2
1924	6	145	4

These carcases were carefully inspected before being passed as fit for food; any carcases or portions condemned being included in the general list under meat and food inspection tables. The veterinary inspection of all live animals arriving at the Dock lairage is carried out by the officials of the Ministry of Agriculture and Fisheries.

OTHER FOODS.

A register of all food preparing premises, as required by the Preston Corporation Act, 1921, Part VI, Sec. 45-46, has been compiled and gives the following figures :—

Food preparing premises on the register	127
Tripe shops and factories	27
Total	154

There were 92 such premises in 1924, and 128 in 1925. During the year the Veterinary Officer paid 49 visits, and the Meat Inspector 174, when the premises were inspected with a view to general cleanliness and methods of manufacture. Improvements in both have been secured in a number of instances and those connected with the preparation of food have been further enlightened as to their responsibilities. There are 15 wholesale premises, and the remaining 139 are butchers' shops where potted meats and sausage are manufactured for sale on the premises.

FRIED FISH SHOPS

Have been the subject of 90 visits by the District Inspectors. The conditions are satisfactory.

The wholesale Fish Market is regularly supervised by Inspector Crossthwaite, 313 visits been paid. The retail markets (1,224 visits) are also continuously examined.

The neighbouring Port of Fleetwood supplies the largest amount of fish to the town and the outlying districts, although consignments are received almost daily from many other fishing centres, viz. :—

Wet Fish—Grimsby, Milford Haven, Hull, Swansea, Peterhead, Glasgow, Campbeltown, Rothesay, Oban, Liverpool, Eyemouth, Baltimore, Londonderry and Killibegs.

Dry Fish—Lowestoft, Yarmouth, Hull, Fraserburgh and Wick.

Shell Fish—Cark-in-Cartmell and Barra (Oban).

Rabbits—Dumfries, Kirksanton (Carnforth), Lazonby, Dalbeattie and Hereford.

The quality of goods reaching the markets and the amount condemned are as follows :—

TABLE IIIa.

Weight	Rabbits, Game. Poultry,			Fruit and Vegetables.			Wet Fish.			Dry Fish.			Shell Fish.			Totals.		
	T.	C.	Q.	T.	C.	Q.	T.	C.	Q.	T.	C.	Q.	T.	C.	Q.	T.	C.	Q.
Examined	47	13	3	4	8	1	3145	3	2	277	11	1	96	12	2	3571	9	1
Condemned	0	5	0	4	8	1	7	11	3	1	5	3	2	8	3	15	19	2

The possibilities of danger to the public health arising from shell-fish was reported upon by the Inspector for the Ministry of Health, and resulted in the publication of the Preston Shell-fish Regulations, 1923, by which the taking of mussels for food in the Ribble Estuary has been rendered illegal.

The Butter and Fruit Markets are subjected to frequent inspections. Visits were paid by the Veterinary Inspector, by the Food Inspector and by the District Inspectors, making a total of 1,224.

SALE OF FOOD AND DRUGS ACT.

In the following tables the work done in connection with the Sale of Food and Drugs Acts is summarised.

In the first table are shewn all those samples among which adulteration was proved. For instance, among 11 samples of rum taken three were proved to be adulterated. In the second part of the table are shewn all those samples among which no adulteration was proved, but which were submitted to special comment by the Public Analyst, usually on account of the addition of preservatives. All the samples of milk were proved to be genuine, compared with 12.5 per cent. adulterated in 1925, 11.1 in 1924, 0.7 in 1923, and 7.1 in 1922. The adulterated samples consisted of informal samples of spirituous liquors found to be under the legalised strength.

The special reports of the Public Analyst called attention to a number of deleterious substances which had either been added to or had reached the article of food in course of preparation. The presence of metallic tin in tinned pork and beans is due to the action of the material on the metallic container. That of arsenic in beer is due to some slight impurity of the sugar used; that of arsenic in apples is due to the nature of the insecticide used in the form of spraying solutions.

Copper sulphate is used to produce a bright green colour in tinned vegetables, and salicylic acid and sulphurous acids are used as preservatives.

Stringent regulations have recently been issued forbidding the use of copper sulphate and regulating the amount and nature of preservatives which may be used.

Public Analyst's Report.

Sale of Food and Drugs Act. Action taken in regard to Adulterated Samples.

Article.	Number Analysed	Number Genuine	Number Adulterated	Reference No. of Adulterated Samples.	Formal	Informal	Amount of Adulteration.	Action taken.
Rum	11	8	3	6	...	1	12·1% Excess water.	Formal sample taken, No. 22.
				202	...	1	Contained spirit of proof strength ... ... 59·1% Contained water ... ... 40·9% 100·0% and was 40·9° u.p., which is 5·9^{e} below the statutory limit, and therefore contained 9% of excess water.	Formal sample taken and found genuine.
Whiskey ...	11	7	4	22	1	...	35·5° u.p. ; slightly too weak.	No action taken.
				7	...	1	4·3% excess water.	Formal sample taken and found genuine.
				141	...	1	35.6° u.p. ; slightly too weak.	No action taken.
				264	...	1	39·1° up.. | 6·3% excess water.	Formal sample taken.
				310	1	...	Contained spirit of proof strength ... ... 62·5% Contained water ... ... 37·5% 100·0% and was 37·5° u.p., which is 2·5^{e} below the statutory limit, and therefore contained 3·8% of excess water.	Cautionary letter sent by Town Clerk.
Brandy	9	8	1	8	...	1	1·2% excess water.	Second sample taken and found genuine.
Gin	10	9	1	201	...	1	40·45° u.p., 5·45° below limit, 8·4%	Formal sample taken and found genuine.

TABLE IIIc.

Public Analyst's Report.

Articles Purchased	Informal	Formal	Ref. No.	Special Report by Public Analyst.	Action Taken.
Beer...	7	...	375	Contained 1/350th gr. of arsenic per gallon.	No action taken.
Tinned Pork and Beans ...	1	...	158	Contained 1·9 gr. of tin per lb.	Do.
Tinned Pineapples ...	2	...	191	Contained foreign ingredient, 2·2 grs. of tin per lb.	Do.
Potted Shrimps	2	...	352	Contained foreign ingredient, 0·9% of borates calculated as boracic acid.	Further sample taken and found genuine.
			353	Contained foreign ingredient, 0·8% of borates calculated as boracic acid.	Further sample taken and found genuine.
Apples	2	...	997	Contained foreign ingredient, 1/35th gr. arsenic oxide per lb.	
			998	Contained foreign ingredient, 1/90th gr. arsenic oxide per lb.	
Milk	...	126	...	All genuine.	
Butter	9	1	...	All genuine. Formal sample was rancid.	
Sago Pudding	1	...	104	Coloured violet with a small quantity of methyl-violet, which is a coal tar dye and said to be non-injurious.	
Tinned Cream	4	...	83	Genuine. 23·1% fat. No preservatives.	
			189	Genuine. 48·5% fat. 0·31% borates.	
			197	Genuine. 29·0% fat. No preservatives.	
			358	Genuine. 50·0% fat. No preservatives.	
Cream (St. Ivel)	1	...	116	Genuine. 26·0% fat. No preservatives.	
Horlick's Malted Milk ...	1	...	136	Genuine. Contained approximately 1/3 dried half-cream milk and 2/3 malt extract.	

TABLE IIIc.—continued.

Public Analyst's Report.

Articles Purchased	Informal	Formal	Ref. No.	Special Report by Public Analyst.	Action Taken.
Composition powder ...	1	...	142	Genuine. Consisted of ginger with small quantities of pigments, cloves, cayenne, and sassafras.	
Aspirin Tablets and Powders.	4	...	111	Genuine. Average weight of tablets, 6·6 grs., 5·8 grs. aspirin.	
			347	Genuine. Each tablet contained 4 grs. aspirin.	
			351	Genuine. Each tablet contained 5 grs. aspirin.	
			341	Genuine. Composed of acetyl and salicylic acid. Weights of powders variable from 4·5 to 8 grs. aspirin.	
Quinine Tablets	1	...	137	Genuine. Each tablet contained 2 grs. quinine sulphate.	

One hundred and eighty-five additional informal samples of the following were also taken and were found to be genuine :—

Dried milks, ice cream, tinned milk, margarine, lard and cheese.

Dried peas, tinned and bottled fruits, preserves, currants, barley, Quaker oats, flour, tinned tomato soup, lime juice, pickles, lemon squash, ground almonds, ground ginger, pepper and arrowroot.

Honey, Tea, coffee, cocoa, sugar, treacle, vinegar, baking powder, lemon cheese, confectionery, sweets and chocolates, table jellies, tinned herrings, sardines, etc., mustard mixture, custard powder, port wine, sherry wine, plum puddings and sausages.

Boracic ointment, borax, sodium bi-carbonate, compound liquorice powder, cream of tartar, castor oil, olive oil, camphorated oil, cod liver oil, glycerine, tartaric acid, Virol, Ovaltine, Parishes' chemical food, Almata, Lactagol.

The cost of the work in connection with the Sale of Foods and Drugs Acts during 1925-26 was £412 10s. 5d.

Meat and Food Inspection.

During the past year the Public Health Meat Regulations, 1924, have been carried out smoothly and satisfactorily. Part III of these Regulations dealing with the marking of meat has been in operation throughout the year. It is a matter for congratulation that this town should be included amongst the very few who have attempted to conform to the conditions of systematic inspection imposed by the Regulations. The stamping of meat should be looked upon as a hallmark of its fitness for food and freedom from disease. All foreign and imported meats have had this important hallmark for many years, but the bulk of home-grown meat has been without adequate guarantee. This might equally be said of other food materials, eggs, etc., and is due to the want of proper organisation in the preparation and distribution of home-grown products.

Part IV of the Regulations has been the means of attaining a high degree of cleanliness and improved conditions in the meat exposed for sale on the market stalls. This improvement has not been obtained without great efforts being made to elevate the standard, and I thankfully place on record the willing co-operation of the butchers and stall-holders with the Authority's officials. Further efforts must be made to keep up and improve the standard now obtaining.

Part V, which deals mostly with shops and stores, has been brought to the notice of all butchers and shop-keepers, and it is hoped that more will be done to give protection to meat exposed in such shops. There is only one adequate way to do this and that is to have a plate-glass window and efficient ventilation in every shop. The pollution by dust and windborne filth is apparent to the casual observer in the case of shops bordering upon busy streets.

Meat Market.

This market, which is held weekly, and which contains about 15 butchers' stalls, is subject to careful supervision and inspection. Stalls are cleaner and more satisfactory and the meat is more efficiently protected than before. Fowls, rabbits, fruit and eggs which are largely sold on Saturday markets are being inspected, as far as circumstances will permit.

SLAUGHTERHOUSES.

There were 13 private slaughterhouses at the end of the year. Of these, one has been abolished at the time of writing. Two are only used for killing a few sheep and calves weekly, and an occasional beast. One is used entirely for pigs. The following table shews the number of animals slaughtered and inspected at the public abattoir and private slaughterhouses respectively.

TABLE IIId.

	Cattle		Sheep		Pigs		Calves	
	Killed	Inspd.	Killed	Inspd.	Killed	Inspd.	Killed	Inspd.
Public Abattoir	3925	3925	21606	21621	1970	2553	892	892
Private Slaughterhouses ...	2748	2748	20126	15625	2424	6278	458	458

There has been a reduction in the number of calves killed of 1,170, as compared with last year. This is due to the fact that a large number of calves were killed at the abattoir for consumption in other towns during the time the Foot and Mouth Restrictions were in force. The diminution in the number of pigs killed to the extent of 1,146 is also noted and this can be accounted for to a great extent for a similar reason, and in addition during the past year Dutch pigs have been coming in freely and pork shops have been using a certain amount of pork—loins, etc.—direct from Birmingham market. The number of pigs inspected exceeds the number killed by 4,437, as against 5,492 in the previous year. In 1923 this excess equalled 4,176 (for ten months). In 1924 it was 7,499.

Of the 4,437 pigs thus inspected, 583 were sent to the abattoir for such inspection prior to delivery to the various shops and 3,854 were inspected at the shops and premises to which they were consigned.

In cases where disease of a tubercular nature was discovered in any consignment of pigs which had been killed and dressed on the farms, the owner or his representative has been personally interviewed, if possible, and the cause of disease and its prevention explained. Propaganda of such a nature has undoubtedly been beneficial both to the farmers themselves and the community in general. The following table shows the number of visits of inspection paid by the Veterinary Officer and the Meat and Food Inspectors.

TABLE IIIe.

	Veterinary Officer	Meat Inspector
Visits to Public Slaughterhouses	171	306
Visits to Private Slaughterhouses	1666	228
Visits to Butchers Shops and other premises	958	195

TABLE IIIf.

Weight of Meat condemned as unfit for human consumption at the Public Abattoirs, Private Slaughterhouses and Dock Slaughterhouse.

	Whole Carcases	Part Carcases	Offal	Total
	lbs.	lbs.	lbs.	lbs.
Cattle	195078	34638	50307	280023
Sheep	4498	505	1878	6881
Pigs	11284	1058	11555	23895
Calves	6512	92	83	6687
				317486

141 tons 14 cwts. 2 qrs. 22 lbs.

TABLE IIIg.

Number of whole carcases and offal condemned as unfit for food on account of Tuberculosis and other conditions.

	Tuberculosis.				Other Conditions.			
	Cattle	Sheep	Pigs	Calves	Cattle	Sheep	Pigs	Calves
Whole Carcases.	325	...	25	1	132	97	35	165
Head	339	...	385	1	68	5	3	...
Lungs	1459	...	489	5	225	54	73	8
Liver	264	...	390	3	1066	457	85	1
Heart	101	...	369	3	24	30	40	4
Spleen	121	...	1	...	26	2	...	...
Kidneys	267	...	43	...	67	...	2	2
Udder	97	...	...	...	518	...	4	...
Stomach	62	...	...	...	25	...	...	...
Skirts	255	...	...	...	44	...	1	...
Mesentery	103	...	33	...	1	...	...	...

This table shows a reduction of 35 in the number of calves condemned for immaturity, evidence that a better class of calf is being killed for veal than formerly. There were 142 more whole carcases condemned for tuberculosis than in the previous year. The Tuberculosis Order, 1925, is largely responsible for this increase.

TABLE IIIh.

Causes of Condemnation in detail.

The weight (lbs.) of meat condemned, the cause of condemnation and the class of animal.

	Cattle	Sheep	Pigs	Calves
Tuberculosis	189710	...	16169	186
Dropsy and Emaciation	22967	2078	170	284
Septic Conditions	15790	...	560	270
Distomatosis	9964	1266	...	
Fevered	10030	...	...	46
Fractures and Bruising	6552	187	366	182
Mammitis (non-septic)	3974	...	40	...
Peritonitis	4515	405	275	58
Decomposition and Putrefaction ...	4556	806	686	309
Asphyxia	1527	1634	3199	382
Actinomycosis	1458	...	...	...
Abscess	1314	31	109	...
Angioma	1137	...	...	...
Parasitic Cysts(inc.Cyst Cellulosae)	1037	95	446	3
Cirrhosis	1055	54	352	1
Pleurisy and Pneumonia	994	60	226	107
Fatty Degeneration	988	25	19	...
Bone Taint	576	...	...	...
Pericarditis	561	...	22	...
Nephritis	539	...	...	...
Congestion	470	49	7	3
Necrosis	211	...	4	...
Arthritis	71	...	8	...
Melanosis	7	...	...	...
Erysipelas	...	...	380	...
Jaundice	...	71	857	56
Immaturity	...	55	...	4746
Lymphadenitis	...	65	...	...
Totals	280023	6881	23895	6687

These figures are very similar to those of the previous year, shewing that the majority of condemnations of cattle and pigs are for tuberculosis, in sheep dropsical conditions and in calves immaturity.

TABLE IIIi.

The following table gives the number of whole carcases condemned for the diseases stated :—

	Cattle	Sheep	Pigs	Calves
Tuberculosis	325	...	25	1
Septic Peritonitis	1	...	...	...
Bruising	4	2	...	1
Fever	20	...	...	1
Peritonitis	9	4	7	1
Dropsy and Emaciation	55	47	2	6
Septic Pneumonia	8	...	...	4
Pyaemia	1	...	...	...
Asphyxia	4	28	17	8
Septic Metritis	5	...	...	...
Septic Mammitis	6	...	...	...
Decomposition and Putrefaction ...	9	14	3	4
Septic Pericarditis	5	...	...	...
Septicaemia	4	...	...	...
Nephritis (Acute)	1	...	...	...
Lymphadenitis	...	1	...	...
Immaturity	...	1	...	135
Sapraemia	...	...	1	...
Jaundice	...	...	3	1
Erysipelas (Swine)	...	...	1	...
Cysticercus Cellulosae	...	...	1	...
Joint Ill	...	...	...	1
Enteritis	...	...	...	3
Total	457	97	60	166

IV.—Prevalence of, and control over, Infectious Diseases.

In an examination of the conditions under which persons, suffering from notifiable diseases, lived, particular attention was directed to the question of ovecrowding. Among 421 families consisting of 2,305 persons, 170 families, or 40 per cent of the whole consisting of 874 persons, or 38 per cent. of the whole, lived in four-roomed houses. Six families (29 persons) lived in smaller houses. Practically equal numbers, 107 and 102 families, containing 584 and 538 persons, lived in five and six-roomed houses respectively. Thirty-six families, consisting of 280 persons, and including one large institution, lived in houses of seven rooms and over. Only 14 families (3.3 per cent.) were technically overcrowded, i.e., more than two persons per room.

A factor of great importance affecting both the morbidity of disease and its epidemic power is the interval between the onset of the disease and its notification by the medical practitioners. With some exceptions, the latter is contemporaneous with the sending for medical aid and the institution of the necessary treatment.

Taking Scarlet Fever and Diphtheria as examples, it is found that only eight cases were notified on the first day of disease, 48 on the second day, and 76 on the third. That is to say, 40.2 per cent. of the cases are notified in the first three days, a reasonable time in which the parents may make up their minds to send for the doctor. 63, 42, and 23 cases (39 per cent. of the whole) were notified on the fourth, fifth, and sixth days respectively. These are the critical days from the treatment point of view. It may be accepted as a fact that there would be no deaths from Diphtheria were treatment by antitoxin instituted before the third day, and the large number of deaths occurring from this disease in particular is directly attributable to the delay in getting the remedy applied. After the first week the delay in notification becomes due to other causes than delay in sending for medical aid, e,g., failure to note slight illness, followed by some secondary symptoms such as desquamation, or peeling of the hands and feet, or Bright's disease in Scarlet Fever, or the onset of some paralytic symptoms following Diphtheria.

As already stated, notification is fairly complete in all cases of illness except in Pneumonia, and Influenzal Pneumonia, and in Epidemic Enteritis.

For the second year in the recorded history of Preston there were no deaths from Measles. There were no deaths from Enteric Fever, and Small Pox, and a great diminution in the deaths from Scarlet Fever and Whooping Cough.

Among the Infectious Diseases which are not included in the Zymotic Diseases, Influenza caused 37 deaths, as compared with 59 and 89 in the preceding two years.

The deaths from Tuberculosis were slightly lower than those of last year, the increase in Pulmonary Tuberculosis being more than offset in the non-pulmonary type of the disease.

The seven principal Zymotic Diseases—Enteric Fever, Small Pox, Measles, Scarlet Fever, Whooping Cough, Diphtheria, and Diarrhœa—caused 40 deaths, giving a Zymotic rate of 0.30 per 1,000 living, as against 0.92 last year and 0.88 for the previous ten years. A table shewing the mortality from and the morbidity of these diseases for the previous five decennia appeared in the Report for 1920. A similar table dealing with the past ten years (Table IVA.), followed by tables relating to the age, sex, ward and time distribution of these diseases is appended (Tables IV. B, C and D).

The sources of notification are primarily notifications made by Medical Practitioners. Almost equalling these in value are the notifications made by Head Teachers in the Schools with regard to school epidemics. These mainly relate to cases of Measles, Whooping Cough, and Chicken Pox, in which a doctor is not always called in. Measles in non-epidemic form continued throughout the year but caused no mortality. The incidence of Scarlet Fever was very light, Diphtheria showed a slightly lessened incidence, and a much lighter mortality. There were eight cases of Enteric Fever notified as against three last year, and 12 cases of Puerperal Fever as against eight. Seven cases of Ophthalmia Neonatorum were notified as against 14 last year.

Under the Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926, it was made compulsory to notify any febrile condition other than Puerperal Fever occurring in women within 21 days after childbirth or miscarriage. Eight such cases were notified in the last three months of the year.

With regard to Influenzal Pneumonia and Primary Pneumonia, there were slightly more notifications than last year, but the total number notified is still very much less than the number of deaths recorded from these diseases. The same remarks apply also to Diarrhœa and Enteritis.

TABLE IVA.

Summary of Zymotic Deaths for 1926 and the preceding ten years.

YEAR	1926	1925	1924	1923	1922	1921	1920	1919	1918	1917	1916	Average FOR 10 YEARS 1916—1925.
Population	124200	122900	123100	121700	120900	119900	121950	117277	105845	106747	109935	117025.4
No. of Deaths.												
Enteric ...	...	1	1	3	2	1	1	2	4	2	11	2.8
Small Pox ...	...	...	...	...	...	...	...	...	...	...	...	...
Measles ...	...	18	21	6	64	...	14	26	2	35	14	19.0
Scarlet Fever	1	9	2	4	2	3	2	2	...	...	10	3·4
Whooping Cough	1	39	4	22	4	29	10	5	35	28	12	18.8
Diphtheria ...	8	18	6	10	9	13	13	19	13	24	38	16.3
Diarrhoea ...	30	28	25	30	27	70	30	43	42	50	69	41.4
Totals ...	40	113	59	75	108	116	70	97	96	139	154	102.7
Zymotic Rate	0.32	0.92	0.47	0.61	0·89	0.95	0.57	0.82	0.90	1.30	1.40	0.88

TABLE IVb.—Cases of Infectious Disease for the Year 1926 classified according to age and sex.

Notifiable Disease.	Under 1 year		1—2		2—3		3—4		4—5		5—10		10—15		15—20		20—25		25—45		45—65		65 and over		Total	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
Diphtheria	1	...	1	2	2	3	7	4	14	9	38	56	19	23	5	6	1	10	5	8	...	1	...	...	93	122
Erysipelas	...	...	...	...	...	...	...	...	...	...	1	...	...	1	1	1	...	...	...	7	7	9	2	4	11	22
Scarlet Fever	...	...	2	...	3	3	6	4	4	9	20	36	9	13	5	...	1	3	3	2	...	1	...	...	53	71
Enteric Fever	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	3	...	1	1	...	...	1	...	...	2	6
Puerperal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6	...	6	...	...	...	...	...	12
Ophthalmia Neonatorum	4	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	4	4
Pulmonary Tuberculosis	...	...	...	...	...	1	1	...	1	2	11	12	4	6	11	15	18	23	29	35	17	9	1	...	93	103
Other Forms of Tuberculosis	1	...	2	...	1	2	...	...	...	1	7	3	3	6	3	1	1	1	3	4	...	1	1	...	22	19
Influenzal Pneumonia	...	...	...	...	...	...	...	1	...	...	...	1	1	...	2	1	2	2	6	2	2	4	...	...	13	11
Primary Pneumonia	2	...	...	2	2	1	2	1	...	3	10	6	6	3	4	2	2	1	13	4	5	1	4	1	50	25
Malaria	...	..	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro Spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	1	...	1	...	...	...	...	1	3
Acute Poliomyelitis	1	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	2	...
Infective Enteritis	2	7	5	2	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	9	9
Chicken Pox	6	5	7	6	6	9	17	10	24	26	90	99	4	10	...	...	...	...	...	...	...	...	...	...	154	165
Measles	8	4	2	4	3	7	10	4	12	10	42	27	9	7	3	...	4	...	...	1	...	1	...	...	93	65
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pyrexia (Puerperal)	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3	...	5	...	...	...	...	...	8
Whooping Cough (not notifiable)	9	8	4	3	8	4	8	10	13	27	23	51	1	...	...	1	...	...	...	...	...	...	...	...	66	104

TABLE IVc.

Cases of Infectious Diseases notified in 1926 and classified according to Ward distribution.

Notifiable Disease.	Total	St. John's.	Avenham.	Christ Church	Ashton.	Maudland.	St. Peter's.	Moorbrook.	Park.	Trinity.	Deepdale.	Ribbleton.	Fishwick.
Diphtheria	215	10	7	22	9	21	30	5	18	24	21	24	24
Erysipelas	33	...	2	7	2	4	1	1	6	...	1	5	4
Scarlet Fever	124	13	13	4	11	8	11	12	6	10	17	11	8
Enteric Fever	8	...	2	1	1	...	1	1	1	...	...	...	1
Puerperal Fever	12	...	1	...	...	1	2	1	9	2	...	1	...
Ophthalmia Neonatorum	8	1	1	...	...	1	1	...	2	...	1	1	...
Pulmonary Tuberculosis	196	28	12	8	13	11	24	20	26	18	20	8	8
Other Forms of Tuberculosis	41	2	2	5	4	1	4	6	5	4	3	2	3
Influenzal Pneumonia	24	1	1	4	...	2	8	...	2	2	2	1	1
Primary Pneumonia	75	4	7	14	5	5	7	2	8	5	5	9	4
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro Spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	4	...	2	...	1	...	...	...	1	...	...	...	...
Acute Poliomyelitis	2	...	...	...	1	...	...	...	...	...	...	...	1
Infective Enteritis	18	4	2	8	...	1	1	...	...	1	...	1	...
Chicken Pox	319	39	38	26	11	56	26	6	13	4	41	48	11
Measles	158	25	19	3	36	13	14	16	4	11	8	4	5
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Pyrexia (Puerperal)	8	...	...	2	...	1	...	...	3	...	1	1	...
Whooping Cough (not notifiable)...	170	22	28	4	4	41	14	2	2	1	30	17	5

TABLE IVd.

Cases of Infectious Diseases notified in 1926 and classified according to month of occurrence.

Notifiable Disease.	Total	January	February	March	April	May	June	July	August	September	October	November	December
Diphtheria	215	16	18	27	23	17	18	12	9	26	21	15	13
Erysipelas	33	12	4	4	3	...	...	1	1	3	3	1	1
Scarlet Fever	124	15	6	6	11	6	7	11	5	19	17	13	8
Enteric Fever	8	...	3	...	1	1	...	...	...	1	1	...	1
Puerperal Fever	12	4	2	...	...	1	...	1	...	2	1	...	1
Ophthalmia Neonatorum	8	...	...	...	1	4	...	...	...	2	1	...	...
Pulmonary Tuberculosis	196	16	17	13	19	7	21	16	8	15	23	23	18
Other Forms of Tuberculosis	41	2	3	5	8	5	5	...	1	4	4	2	2
Influenzal Pneumonia	24	2	2	3	4	...	5	1	1	...	2	1	3
Primary Pneumonia	75	2	6	4	7	12	8	8	1	4	3	10	10
Malaria	...	...	...	...	...	...	...	...	...	...	...	...	...
Dysentery	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro Spinal Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	4	...	...	2	...	...	2	...	...	...	...	...	...
Acute Poliomyelitis	2	...	...	...	...	...	...	...	...	...	...	2	...
Infective Enteritis	18	...	...	...	...	1	2	2	4	2	6	1	...
Chicken Pox	319	78	32	54	40	38	36	2	...	7	8	18	6
Measles	158	12	15	18	16	11	13	26	3	3	5	9	27
Small Pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Pyrexia (Puerperal)	8	...	...	...	...	...	...	...	...	...	3	2	3
Whooping Cough (not notifiable)...	170	6	10	15	9	5	19	8	38	14	19	19	8

ENTERIC FEVER.

	1926.	1925.	1924.	1923.
No. of cases notified	8	3	18	16
No. of deaths	Nil.	1	1	3
Case of incidence per 1,000 population	0.064	0.024	0.14	0.13
Mortality per 1,000 population ...	Nil.	0.008	0.008	0.02
Morbidity per cent. of cases notified.	Nil.	33·3	5·5	18·75

The type of the disease was mild and on tests of the blood were found to be due to infection by Bacillus Para-Typhosus. All the cases recovered. None of the cases were associated in point or time or locality. Two of the cases probably contracted the disease outside and no suspicion was thrown upon any article of food consumed.

SCARLET FEVER.

	1926.	1925.	1924.	1923.
No. of cases notified	124	330	219	223
No. of deaths	1	9	2	4
Case incidence per 1,000 population .	1.00	2.68	1·77	1.83
Mortality per 1,000 population ...	0.008	0.073	0.016	0.032
Morbidity per cent. of cases notified .	0.81	2.73	0.9	1.8

The number of cases of Scarlet Fever notified and the deaths caused thereby shewed a very marked reduction during the year. The type of the disease is very mild and secondary complications are rare. The age group (5—10) was the one principally affected, the next heaviest age groups being 1—5, and 10—15. The disease was spread evenly over the town with a slight excess in the Winter and Spring months.

Eighty per cent. of the children were removed to Hospital compared with 81 per cent., 86 per cent., and 84 per cent. in preceding years.

The fatal case died at home.

DIPHTHERIA.

	1926.	1925.	1924.	1923.
No. of cases notified	215	237	131	144
No. of deaths	8	18	6	10
Case incidence per 1,000 population ...	1.73	1.93	1.14	1.183
Mortality per 1,000 population ...	0.064	0.014	0.05	0.08
Morbidity per cent. of cases notified .	3·72	7·59	4·58	7·00

The number of cases notified showed a slight diminution compared with last year, but is still higher than the average during the previous five years. The Disease is mainly one of young children, age group 5—10 being the most severely affected. There was an excessive incidence borne by Christ Church, St. Peter's, Trinity, Deepdale and Ribbleton Wards. The largest number of cases were reported during the months of March, April, September and October. There were eight deaths, six of which took place in the Isolation Hospital. One hundred and seventy-seven or 82.3 per cent. were admitted to the Isolation Hospital, figures comparable with those of the previous three years.

MEASLES.

There is very little to relate with regard to this disease. 158 cases spread evenly over the town, with a slight excess in St. John's and Ashton Wards, were brought to the notice of the Department by Doctors and by School Teachers. The number notified in July, 1926, was double that in June, but rapidly fell in the succeeding months. December saw a slight recrudescence.

SMALL POX.

There has been no case of Small Pox reported in Preston or neighbourhood.

The Clerk to the Preston Guardians has kindly supplied the following figures :—

Vaccination.

	1922.	1923.	1924.	1925.
No. of Births	2,509	2,474	2,286	2,239
Vaccinated successfully	1,434	1,476	1,419	1,201
Insusceptible	5	4	12	13
Conscientious Objectors' Refusals	638	553	511	576
Died unvaccinated	172	185	182	199
Postponements	143	49	33	27
Removals to other Districts ...	...	...	108	105
Unaccounted for	117	207	121	118

INFLUENZA.

The great part played by Influenza in our Vital Statistics may be illustrated by the following summary, in which deaths due to Bronchitis and Pneumonia are also included :—

	No. of deaths caused by		
	Influenza.	Bronchitis.	Pneumonia.
1916	37	150	173
1917	31	160	176
1918	391	151	210
1919	166	183	168
1920	37	154	153
1921	32	118	139
1922	85	151	151
1923	54	161	189
1924	89	160	175
1925	59	143	175
Average	98.1	153.1	170.9
1926	37	95	131

Cases of Influenza and deaths from the Disease were very much less than previous years, the disease not being present in epidemic form.

WHOOPING COUGH.

One hundred and seventy cases came to the notice of the Department compared with 452 in 1925. There was one death compared with 39 in the previous year. The source of notifications is mainly Head Teachers of the schools (110 cases), secondary cases being discovered by the Health Visitors in their visits to the homes (60 cases). In 127 instances, or 74 per cent. of the whole, only one case occurred in the house, in 22 instances a second case developed, in five instances a third case, in two instances a fourth case, and in one instance a sixth one. In 117 or 69 per cent. of the whole the Health Visitors noted that there was no attempt at isolation. The bulk of the cases occurred between the 5th and 10th year, but all age groups suffered extensively, those under school age being more severely infected than in the ordinary infectious disease such as Diphtheria and Scarlet Fever. The wards bearing the heaviest infection were Maudland (41), Deepdale (30), whereas one case only was notified as occurring in Trinity, two each in Park and Moorbrook, and four each in Ashton and Christ Church. The cases were spread evenly over the year, with a large excess in August.

CHICKEN POX.

Three hundred and nineteen cases of Chicken Pox were notified as compared with 374 in 1925. Seven-eights of the total cases were spread evenly over the first half of the year; the epidemic, but for the isolated cases, dying out abruptly at the end of June.

The source of notification was 211 by Head Teachers, 35 from Medical Practitioners, 10 from Parents, while 63 were discovered by the Health Visitors in the course of their visits. In 231 instances the case was the only one arising in the household, in 40 instances a second case arose, and in eight instances a third case.

The whole town was infected, Ashton, Moorbrook, Trinity, and Fishwick Wards having the fewest cases. The disease affected all ages, children of school age equalling three-quarters of the total cases.

EPIDEMIC DIARRHŒA.

During the year there were 30 deaths caused by this disease, of which 21 were those of infants. One of the deaths occurred in the Preston Royal Infirmary and three in the Poor Law Institution. Four of the deaths occurred in August, and eight in September, the remainder were spread over the year. Three infants were removed to the Isolation Hospital.

As already mentioned the notification of this disease is most disappointing, 18 cases only being notified. Nine of these were infants, seven in children aged 1—2, one aged 2 years, and one aged 5 years. The notifications were spread over a period from May to November, six being notified in October.

Those cases which were brought to our notice by attendance at the Clinics or by the Health Visitors in their home visits were carefully followed up and suitable advice given as to treatment. In too many instances it seems as though a combination of circumstances, bad housing, poor food storage, lack of means and inability to learn right methods, combined in some instances with the grossest carelessness in the domestic handling and preparation of the children's food was operating to produce this unnecessary mortality.

PUERPERAL FEVER AND OPHTHALMIA NEONATORUM.

The above diseases are dealt with in the Maternity and Child Welfare Section of the Report.

TUBERCULOSIS,

By Dr. James Walker. M.B.. Ch.B.. D.P.H.

(1) INCIDENCE OF THE DISEASE.

In the year under review the total number of cases of Tuberculosis (all forms) notified in Preston was 237. This is in excess of the previous year's figures when 193 notifications were received. The apparent increase may be regarded as due probably to the increased efficiency of notification and does not necessarily denote a rise in the incidence of the disease. A larger proportion of the cases actually occurring are now notified and thus are brought under the control of the Department.

The above figures give a notification rate of 1.91 per 1,000 of the population. Of this rate the pulmonary form of the disease is responsible for 1.58, and the non-pulmonary forms for .33 per 1,000.

The following table shows the number of notifications received in Preston during the last eight years.

TABLE IVE.

Year	NOTIFICATIONS.—Preston.		
	Pulmonary	Non-Pulmonary	Total
1919	281	25	306
1920	246	60	306
1921	166	52	218
1922	191	46	237
1923	163	45	208
1924	184	48	232
1925	135	58	193
1926	196	41	237

In Chart 1 are shewn for comparison the notification rates of Tuberculosis in Preston and for England and Wales as a whole during the last ten years.

The following three tables deal with the age and sex distribution of the notified cases (primary notifications on Form A), the relative incidence in the different wards of the Borough, and the occupations in age and sex groups.

TABLE IVF.

Summary of Notifications during the Year 1926.

	Notifications on Form A.											
Age periods	0–1	1–5	5–10	10–15	15–20	20–25	25–35	35–45	45–55	55–65	65–	Total
Pulmonary Males	...	2	11	4	11	18	12	17	15	2	1	93
„ Females	...	3	12	6	15	23	22	13	8	1	...	103
Non-Pulmonary Males	1	3	7	3	3	1	1	2	...	...	1	22
„ Females	...	3	3	6	1	1	2	2	...	1	...	19

TABLE IVG.

Ward Incidence of Tuberculosis.

WARD	Number of Notified Cases.			Incidence Rate per 1000 of the population.
	Males	Females	Total	
Avenham	8	6	14	1.88
Trinity	14	8	22	2.17
Deepdale	10	13	23	1.94
Fishwick	7	4	11	1.41
St. Peter's	12	16	28	2.32
Ashton	9	8	17	1.81
St. John's	14	16	30	2.45
Moor Brook	13	13	26	2·83
Park	11	20	31	2.04
Maudland	7	5	12	1.19
Christ Church	6	7	13	1.46
Ribbleton	4	6	10	1.00
TOTALS ...	115	122	237	1.91

TABLE IVh.

Occupation in age and sex groups of notified cases of Tuberculosis in 1926.

Occupation		0–1	1–5	5–10	10–15	15–20	20–25	25–30	30–35	35–40	40–45	45–50	50–55	55–60	60–65	65-	Totals
Under School Age	M	1	5	...	...	...	...	...	...	...	...	...	...	...	...	...	6
	F	...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	6
School Children	M	...	...	18	7	...	...	...	...	...	...	...	...	...	...	...	25
	F	...	...	15	9	...	...	...	...	...	...	...	...	...	...	...	24
Domestic Duties	F	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cotton Mill Operatives	M	...	...	...	...	4	3	1	...	2	...	1	...	...	...	...	11
	F	...	...	...	1	10	14	6	6	5	1	3	1	1	...	...	48
Labourers	M	...	...	...	...	1	2	3	...	3	3	4	...	1	1	1	19
Clerks	M	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1
	F	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	2
Shop Keepers and Assistants	M	...	...	...	...	...	1	...	...	...	...	...	1	...	...	1	3
	F	...	...	...	...	1	...	...	1	...	...	...	1	...	...	...	3
Engineers and Mechanics	M	...	...	...	...	2	4	...	1	...	...	...	...	...	...	...	... 7
Iron Workers	M	...	...	...	...	1	2	...	...	...	1	...	...	...	...	...	4
Rubber Workers	M	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
	F	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1
Electrical Workers	M	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
	F	...	...	...	...	1	1	1	...	...	...	...	...	...	...	...	3
Wood Workers	M	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	2
Other Occupations	M	...	...	...	...	3	7	5	2	4	5	7	2	...	...	...	35
	F	...	...	...	...	3	3	6	1	1	..	1	..	...	...	...	15
No Occupation	M	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	F	...	...	...	2	...	5	1	1	4	4	2	...	1	...	...	20
Totals	M	1	5	18	7	14	19	9	4	10	9	12	3	1	1	2	115
	F	...	6	15	12	16	24	15	9	10	5	6	2	2	...	...	122

(2) DEATHS.

During 1926 the number of deaths registered in Preston as due to Tuberculosis (all forms) was 140. This shows a slight decrease from the figures of the previous year when 144 deaths were registered. The ratio of non-notified deaths to the total deaths is as one to three.

Of the total deaths from Tuberculosis 101 were due to the pulmonary form of the disease, and 39 were caused by other forms. The death rate from the disease (all forms) was 1.12 per 1,000 of the population, against 1.17 for 1925. The pulmonary form was responsible for a death rate of .81 per 1.000, while other forms of the disease caused a rate of .31 per 1,000.

The age and sex distribution of these deaths is shewn in the following table, and Chart 2 compares the Tuberculosis death rate of Preston with that of England and Wales during the past ten years.

(3) PROGRESS OF THE CORPORATION'S SCHEME.

From year to year additions are being made to the Corporation's organisation for dealing with Tuberculosis. The cumulative experience of past years has shewn that the anti-tuberculosis schemes of Local Authorities are being developed along the right lines, and the main object must be to make such schemes sufficiently comprehensive in scope to deal adequately with the disease in all its phases. This object is gradually being attained.

The outstanding feature during the past year has been the completion and opening of the new Sanatorium at the "Chestnuts." The necessity for this extension and improvement has been emphasised in previous reports, and it is sufficient to say that the immediate results have fully justified the step taken.

Work on the new building was commenced in September, 1925, and the sanatorium was formally opened for the reception of patients on September 2nd, 1926, by his Worship the Mayor (Alderman J. Woolley, Esq.).

The Corporation now possesses an institution, built on the most modern lines, which is eminently suitable for the treatment of the type of cases received there. There is accommodation for 30 patients (13 beds for males, and 17 for women and children), and one of the chief features is the provision of separate wards for the isolation of certain types of cases.

This development has greatly improved the accommodation for the patients as well as enabling a greater number of cases to be dealt with. There is now no waiting list for this institution, and it is already evident that the increased facilities will have the effect of reducing somewhat the Corporation's expenditure on beds at other institutions. Also, the work of the administration has been facilitated, and the amenities of institutional life have been greatly enhanced by the adequate separation of staff from patients.

Further developments are foreshadowed at the " Chestnuts " in a scheme which is at present going forward for the erection of workshops. The object of this is to provide suitable light occupations for the patients.

Of other developments in the Corporation's scheme reference must be made to the provision of dental treatment, when considered necessary as part of the general treatment of the disease, for those patients who are unable to obtain such treatment through other channels.

Also increased facilities are now available for the use of X-rays in the diagnosis of the disease. There is no doubt that, not only in bone and joint conditions, but also in the investigation of pulmonary disease the use of X-rays has proved a valuable aid and has now become an integral part of the process of arriving at the diagnosis of doubtful and suspicious cases. The Corporation has made arrangements for this work to be carried out at the Preston Royal Infirmary.

There have been no administrative changes in the Dispensary Organisation during the year. The average number of beds available to the Corporation at the various institutions for the treatment of Tuberculosis is shewn in the following table.

TABLE IVi.

Cause of Death.	Sex	All Ages	0—1	1—5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 a ove
Pulmonary Tuberculosis ...	M	54	...	1	2	1	2	4	7	13	16	5	3
	F	47	1	...	...	...	9	4	15	7	7	2	2
Other Tuberculous Diseases...	M	22	6	6	...	...	1	3	...	3	2	1	...
	F	17	1	4	1	2	2	1	1	3	2	...	...

TABLE IVJ.

Average number of beds available for patients during the year 1926.

	Pulmonary Tuberculosis		Non-Pulmonary Tuberculosis	Total
	Sanatorium Beds	Hospital Beds		
Adult Males	10	13	2	25
Adult Females	10	14	2	26
Children under 15	13	3	6	22
Total	33	30	10	73

(4) WORK DONE DURING THE YEAR.

The following is a summary of the work carried out during the year under the Dispensary Organisation :—

(a) At the Dispensary.

During the year 446 new patients were examined by the Tuberculosis Officer, either at the Dispensary or at their own homes.

Old patients made 2,782 attendances at the Dispensary for treatment, reports, or observation purposes.

Of the new patients 195 were diagnosed as suffering definitely from Tuberculosis in some form or other, 161 from pulmonary. and 34 from non-pulmonary Tuberculosis.

The pulmonary cases were classified as follows :...

T.B. –	106
T.B. + Group 1	22
T.B. + Group 2	27
T.B. + Group 3	6
	161

The non-pulmonary cases were classified as follows :—

Bones and Joints	7
Abdominal	11
Peripheral Glands	11
Other Organs	5
	34

(b) WORK OF THE TUBERCULOSIS NURSES.

The nurses (two in number) have made 179 visits to the homes of new patients, and 3,130 re-visits to those of old patients.

The following table compiled from the nurses' house reports deals with the number of persons in infected houses. The figures above the heavy line show the number of families where there were more than two persons per room—they number 15 families, consisting of 110 persons.

TABLE IVK.

No. of Rooms in Infected Houses.	Number of Persons.												TOTAL.	
	1	2	3	4	5	6	7	8	9	10	11	12		
	Number of Families.												Houses	Occupants
1 Room ...	...	...	2	1	...	...	...	...	...	...	...	...	3	10
2 Rooms ...	...	3	4	...	1	...	...	...	...	...	...	...	8	23
3 Rooms ...	...	5	10	19	9	9	4	1	2	...	...	...	59	269
4 Rooms ...	...	4	12	14	13	8	3	...	1	2	...	...	57	263
5 Rooms ...	...	1	8	11	30	9	17	4	1	1	...	1	83	456
6 Rooms ...	...	...	...	1	...	1	...	...	...	...	...	...	2	10
7 and over ...	...	...	...	2	3	...	...	1	...	...	...	...	6	31
Families ...	...	13	36	48	56	27	24	6	4	3	...	1	218	...
Persons ...	...	26	108	192	280	162	168	48	36	30	...	12	...	1062

CHART 1.

NOTIFICATION RATES OF TUBERCULOSIS (ALL FORMS) FOR ENGLAND AND WALES AND FOR PRESTON 1916.-1926.

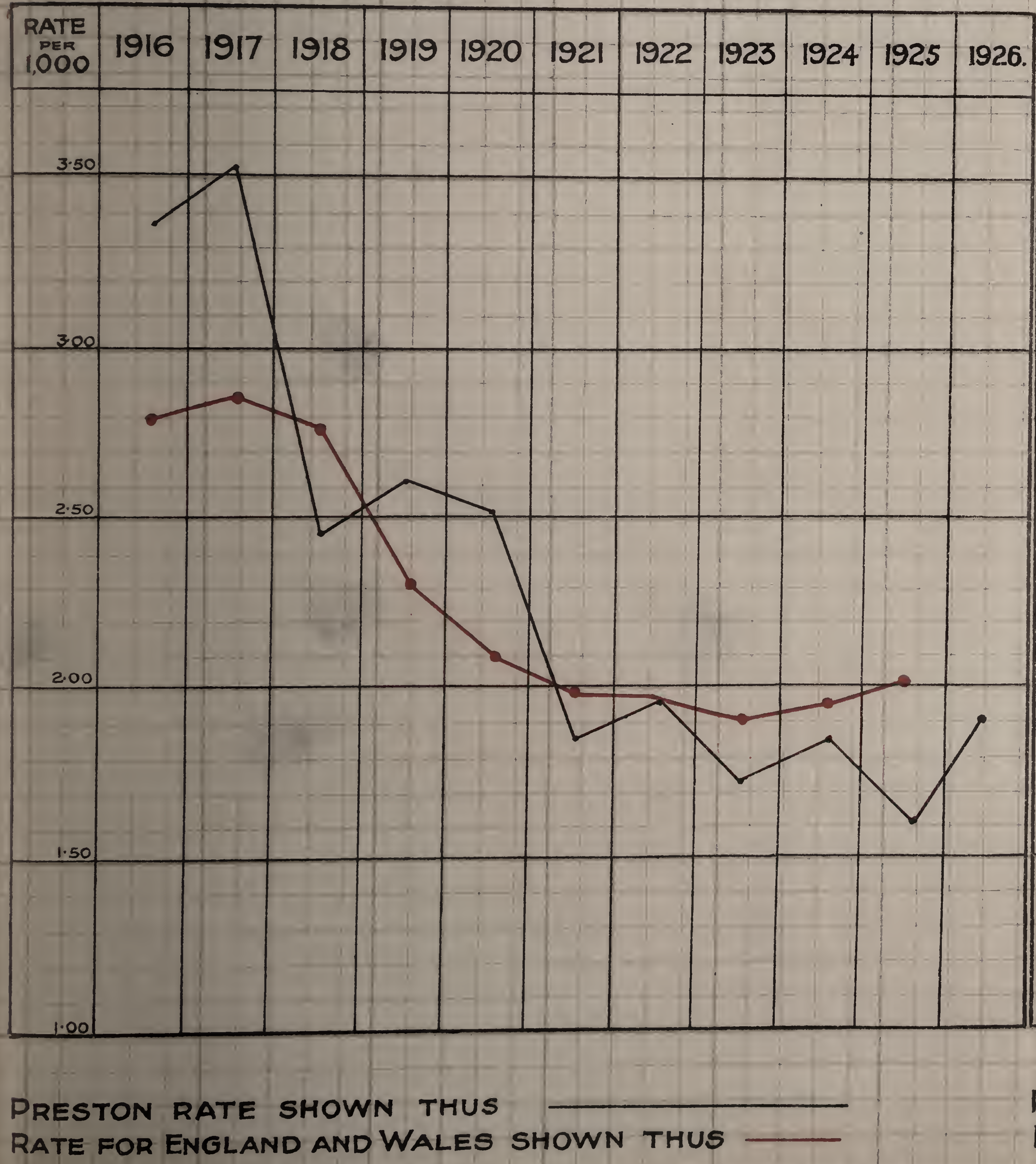
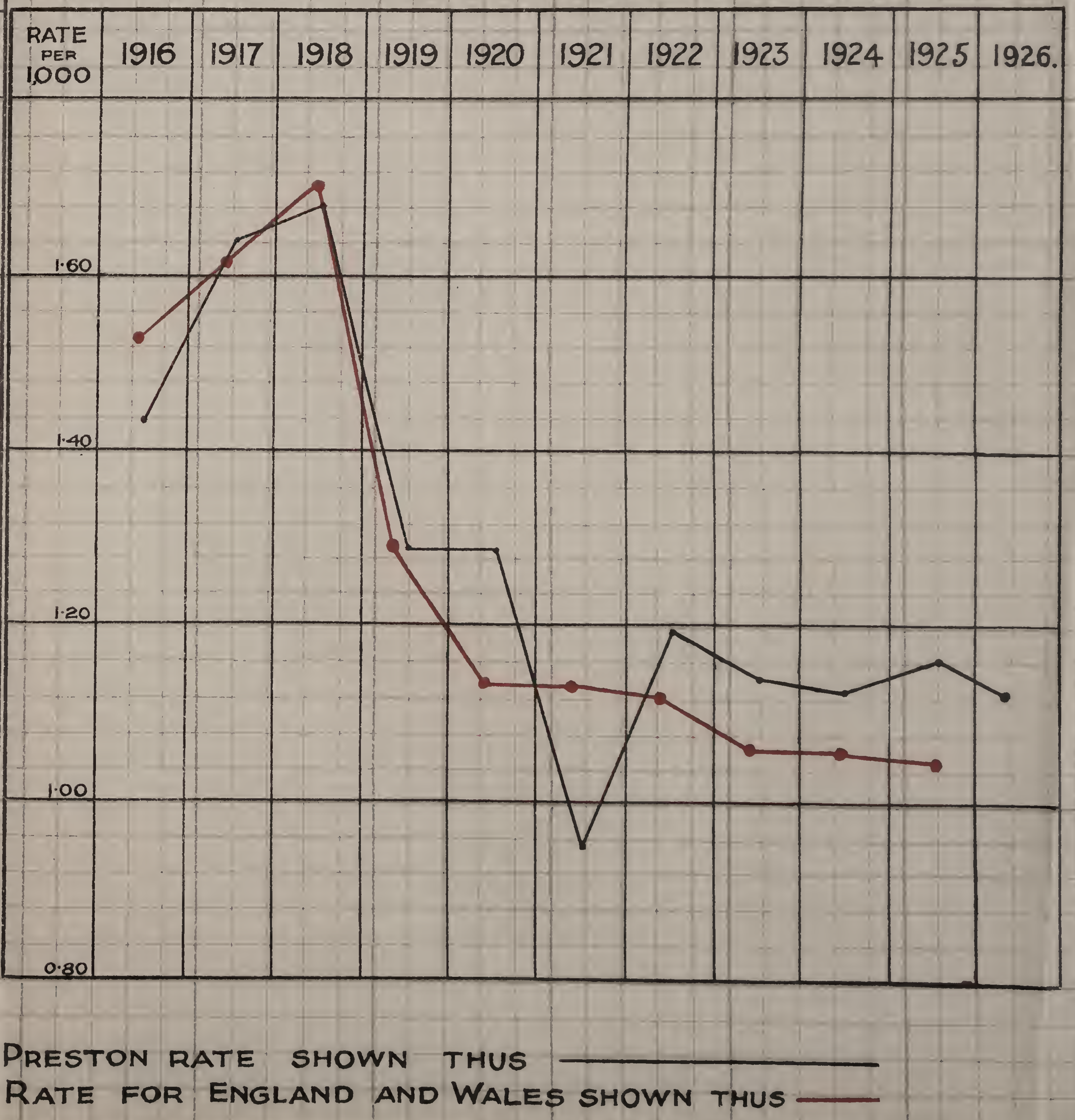


CHART 2.

DEATH RATES FROM TUBERCULOSIS (ALL FORMS). FOR ENGLAND AND WALES AND FOR PRESTON 1916 -1926.



(c) RESIDENTIAL TREATMENT.

The following table deals with the patients who received institutional treatment during the year, and shows the numbers admitted and discharged.

TABLE IVL.

Return showing the extent of Residential Treatment during the year 1926.

NUMBER OF PATIENTS :—

	In Institutions on Jan. 1	Admitted during the year	Discharged during the year	Died in the Institutions	In Institutions on Dec. 31
Adults M	11	61	48	4	20
,, F	18	62	53	5	22
Children M	6	28	27	1	6
,, F	9	30	30	1	8
NUMBER OF OBSERVATION CASES :—					
Adults M	...	3	3	...	...
,, F	...	...	...	...	...
Children M	...	...	...	...	...
,, F	...	1	1	...	...
Total ...	44	185	162	11	56

It will be seen that 185 patients were admitted to institutions during the year, and of these 59 were children under 15 years of age.

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

There was no instance in which a tuberculous person was engaged in the Milk Trade.

PUBLIC HEALTH ACT, 1925. SECTION 62.

There was no instance in which the Council applied for an Order for compulsory removal to Hospital of a tuberculous person.

WORK DONE IN BACTERIOLOGICAL LABORATORY DURING 1926.

The following is the number of specimens examined during the year :—

Specimens of Sputum examined for Tubercle Bacilli ...	539
Throat Swabs examined for Diphtheria Bacilli	1,320
Other miscellaneous specimens	7
	1,866

VENEREAL DISEASES.

The Clinics for the treatment of Venereal Diseases are held at the Preston Royal Infirmary at the times stated below.

The premises were specially built and equipped for the purpose, and are in charge of Dr. W. H. Pimblett, M.B.. C.M., Hon. Physician at the Infirmary. Dr. Pimblett is assisted by one of a rota of medical men at each of the Clinics held for men, and by the Assistant Medical Officer for Maternity and Child Welfare at the Clinic held for women.

The Clinics are held at the following times :—

Arrangements and Time Table.

Clinics—

Tuesday—Females	4-30 to 7-0 p.m.
Wednesday—Males	4-30 to 7-30 p.m.
Friday—Males	4-30 to 7-0 p.m.

Intermediate Treatment for Gonorrhoea—

Friday—Females	2-0 to 3-0 p.m.
Males—Every day (except Sunday)—	
Morning	8-30 to 9-30
Evening	5-0 to 7-0

The two tables appended (IVm. and IVn.) shew the work in detail in the form required by the Ministry of Health. Briefly the work is as summarised here :—

	1926	1925
Total New Cases	572	508
Total Attendances at Clinic	13378	13325
,, ,, Males ...	3507	3854
,, ,, Females	2330	2423
Intermediate Attendances—		
Males	6856	6426
Females	685	622

Dr. W. H. Pimblett reports as follows :—

The chief feature noticed at the Clinics is the increase of intermediate attendances for special treatment which is a very important factor in the cure of Venereal Disease. The Medical Officer of the Maternity and Child Welfare Centres of the Corporation attends the Female Department on Tuesdays and Fridays as Clinical Assistant, with special reference to the local treatment of Gonorrhoea, and with very satisfactory results. Special emphasis is laid on the importance of this, as there is no doubt that the gonococcus is responsible for a good deal of puerperal septicœmia. Hence the great value of ante-natal treatment at the Clinics.

In those Maternity Homes where a routine Wasserman Test is taken, 10 per cent. of the mothers have been found to be affected with Syphilis. This, if not treated. must result in an enormous number of congenital cases in the next generation.

When patients attend the Adult Clinic, efforts are made to persuade them to bring the children for examination, and, if necessary, for treatment. The Eye Department of the Infirmary provides the majority of those cases of congenital syphilis who shewed any symptoms of the disease when first seen, and the treatment given at the Clinic has cured many cases of serious eye diseases which, with ordinary treatment, had proved very intractable, or almost hopeless.

The necessity for special Venereal Clinics is shewn by the fact that, if the treatment is to be efficiently carried out, the technique requires considerable training and experience, and, in order to maintain the standard consistent with the best results, constant practice is essential. The opportunities for research are most attractive, and further, its potentialities for good in improving the national health must appeal to all who have humanitarian and sociological ideals.

PROPAGANDA.

During the week November 21st—27th, a series of Lectures and Demonstrations was organised, with the assistance of the British Social Hygiene Council. The Lectures, accompanied by instructive films, were held in the Public Hall, and were very well attended.

They dealt for the most part with Venereal Diseases, but other subjects of general Public Health Interest were also treated.

In addition to the above, a series of six Lectures on Public Health Matters was given by the Medical Officer of Health, to various Sunday School organisations.

TABLE IVM.

RETURN relating to all persons who were treated at the Treatment Centre at Preston Royal Infirmary during the Year ended 31st December, 1926.

	Syphilis		Soft Chancre		Gonorrhœa		Conditions other than Venereal		TOTAL	
	Males	Females	Males	Females	Males	Females	Males	Females	Males	Females
1. Number of persons who, on the 1st January, 1926, were under treatment or observation for :—	136	142	...	...	134	51	...	...	270	193
2(a). Number of cases dealt with at the Treatment Centre during the year **for the first time**	136	84	...	...	139	35	103	75	378	194
Total—Items 1 and 2(a)	272	226	...	...	273	86	103	75	648	287
2(b). Number of persons included in Item 2(a) known to have received **previous treatment at other Centres** for the same infection	5	1	...	...	2	...	...	...	7	1
3. Number of persons who ceased **to attend** the out-patient Clinic										
(a) before completing the first course of treatment for	14	7	...	...	...	...	...	...	14	7
(b) after one or more courses but before completion of treatment for	29	20	...	...	...	...	...	...	29	20
(c) after completion of treatment, but before final tests as to cure of	...	...	...	...	...	...	...	...	...	...
4. Number of persons transferred to other Treatment Centres **after treatment for**	25	3	...	...	7	1	...	...	32	4
5. Number of persons discharged from the out-patient Clinic after completion of treatment and observation for	61	29	...	...	155	31	103	75	319	135
6. Number of persons who, on the 1st January, 1927, were under treatment or observation for :—	143	167	...	...	111	54	...	...	254	221
Total—Items 3, 4, 5 and 6	272	226	...	...	273	86	103	75	648	287
7. Out-patient attendances :—										
(a) For individual attention by the Medical Officer ...	1965	1578	...	...	1320	569	222	183	3507	2330
(b) For intermediate treatment, e.g., irrigation, dressings, etc.	...	...	...	...	6856	685	...	...	...	...
Total Attendances ... 13,378										
8. Aggregate number of " In-patient days " of treatment given to persons who were suffering from :—	...	...	...	...	...	...	...	...	...	...

9. Examination of Pathological material :—	For detection of			For Wassermann Reaction
	Spirochetes	Gonococci	Other Organisms	
(a) Specimens which were examined at, and by the Medical Officer of, the Treatment Centre	17	634	Nil.	Nil.
(b) Specimens from persons attending at the Treatment Centre which were sent for examination to an approved laboratory	...	...	...	499

TABLE IVn.

Statement showing the services rendered at the Treatment Centre at the Preston Royal Infirmary during the Year classified according to the areas in which the patients resided.

	Preston	County of Lancs.	Manchester	Westmorland	Liverpool	Blackburn	Blackpool			Total
A. Number of persons from each area dealt with during the year at or in connection with the out-patient Clinic **for the first time** and found to be suffering from :—										
Syphilis	167	51	...	...	...	...	1			219
Soft Chancre	...	...	...	...	...	...	...			...
Gonorrhœa	130	40	...	1	1	2	1			175
Conditions other than venereal	132	46	...	...	...	...	...			178
Total	429	137	...	1	1	2	2			572
B. Total number of **attendances at the out-patient Clinic** of all patients **residing in each area**	10130	3162	4	29	10	28	5			13378
C. **Aggregate number of "In-patient days" of all patients residing in each area**	...	...	...	...	...	...	...			...
D. Number of doses of **Salvarsan substitutes given in the**										
1. Out-patient Clinic										
Neokharsivan .6	583	203	...	...	...	...	4			790
.45	598	173	...	...	...	...	...			771
.75	14	5	...	...	...	...	...			19
Hg.	1138	340	...	..	...	...	3			1481
Other Medicines	878	334	...	26	10	18	...			1266
Bismostab	72cc	7cc	...	...	...	...	...			79cc
2. In-Patient Department to patients residing in each area	...	...	...	...	...	...	..			...

E. Give the names of arsenobenzol compounds used in the treatment of syphilis and the usual initial and final doses

N.A.B.—.45 (sometimes .35) to .75.
Neo.K.—.45 (sometimes .35) to .75.
Stabilarsan .30 to .60.
Sulfarsenol .01 to .3 according to age.

F. State the amount and kind of treatment usually administered to a case of Syphilis of each of the types usually dealt with at the Treatment Centre

(I) Primary cases with negative reaction.
(a) Course A. (b) No treatment for five weeks. (c) R.I. for three weeks. (d) Course A. (e) Suspend all treatment with a Wasserman test every three months during first year and every six months during the second year, a provocative Neo.K. being used at end of first and second years.

(II) Primary cases with positive Wasserman reaction and early secondary cases.
(a) As in (I) (a) to (d). (b) No treatment for ten weeks. (c) R.I. for three weeks. (d) Course C. (e) Suspend all treatment and observe patient as indicated in (I) (a) above.

(III) Cases which are later than secondary.
(a) Course B. (b) Three weeks R.I. (c) No treatment for ten weeks. (d) Course C. (e) Three weeks R.I. (f) Repeat (c) to (e) twice. (g) No treatment for 16 weeks. (h) Course C. (j) Three weeks R.I. (k) No treatment for 18 weeks. (l) Course C.

—*St. Thomas' Hospital Gazette.*

Nerve Cases Syphilis.
(a) Course D employing Bismuth. (b) Three weeks R.I. (c) No treatment for eight weeks. (f) Repeat (a) and (b).

G. State the nature of tests applied in deciding as to discharge of patients referred to in Item 5 on previous page

Syphilis.
(1) Primary infection with negative Wasserman.—Two years' observation from commencement of treatment, a Wasserman every three and later every six months.
(2) Primary infection with positive Wasserman and secondary cases.—Two years freedom from all signs of the disease after suspension of all medical treatment, a Wasserman being taken every three and later every six months. Provocative N.A.B. and, Wasserman used as required.

Gonorrhœa.
(1) Males.—Resume usual habits, food and exercise. Full sized bougies. AgNO 3 1% instillation. No urethral discharge. Palpation over metal bougies. Microscopic examination of films made from threads and centrifugalised deposits. Palpation and massage of prostate and seminal vesicles and film made of any secretions.
(2) Females.—Resume usual habits, food and exercise. AgNO 3 15% to the cervical canal.
Palpation urethra and discharge, if any, examined.
Ferguson's speculum—discharge from vagina and cervix examined.

V.—Maternity and Child Welfare.

The number of children born (2,160) and the Birth Rate which was 17.39 per 1,000 living, continued the decline which has been apparent since 1920. Of the 2,160 births, 1,125 were males and 1,035 females; 2,045 were legitimate and 115 illegitimate. The percentage of illegitimate births was 5.3.

The number of infant deaths was 195; of these 110 were males and 85 females. Deaths among legitimate children numbered 170, and illegitimate children 25. The death rate per 1,000 born was 90.

The Birth Rate and Infant Mortality Rate are given in detail in Tables IA. IC, and IG, and a detailed statement of the causes of and age periods at death in Table VA.

A comparison with the Infant Mortality figures of the Lancashire and Cheshire Great Towns, relating to the figures for the 52 weeks ended January 1st, 1927, is given in Table IG. The figure for 1926 is the lowest recorded. The sexes are not equally affected in either their birth rate or their infant mortality thus:—

	Birth Rate.		Infant Mortality.	
	Males.	Females.	Males.	Females.
1923 ...	10.01	9.7	107	88
1924 ...	9.69	9.3	122	70
1925 ...	8.8	8.8	144	119
1926 ...	9.0	8.3	98	82

Year	Legitimate Births	Deaths of Legitimate Children	Rate per 1000 born	Illegitimate Births	Per cent of total	Illegitimate Deaths	Rate per 1000 born
1915	2387	...	...	132	5·5	...	...
1916	2150	...	...	143	6·6	...	...
1917	1831	...	...	167	9·0	...	...
1918	1754	...	...	181	10·3	...	...
1919	1984	...	...	174	8·0	...	...
1920	2810	280	99	174	5·8	21	120
1921	2534	278	109	177	6·3	38	215
1922	2350	225	95	132	5·6	17	129
1923	2316	220	95	110	4·5	18	164
1924	2216	202	91	112	4·8	23	205
1925	2088	273	131	86	3·9	13	151
1926	2045	170	83	115	5·3	25	217

TABLE Va.

Infantile Mortality, 1926.

Nett Deaths from stated Causes at various Ages under One Year of age.

CAUSE OF DEATH.	Under 1 Week.	1 - 2 Weeks.	2 - 3 Weeks.	3 - 4 Weeks.	Total under 1 Month.	1 - 3 Months.	3 - 6 Months.	6 - 9 Months.	9 - 12 Months.	Total Deaths under One Year.	
All Causes:—											
Certified	57	14	6	7	84	29	31	26	18	188	
Uncertified	5	...	...	1	6	...	1	...	...	7	
										M	F
Small Pox	...	...	...	...	...	...	...	...	...	...	...
Chicken Pox	...	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	...	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	1	...	...	...	1
Diphtheria and Croup	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	2	1	3	...
Abdominal Tuberculosis	...	...	...	...	...	1	1	1	1	3	1
Other Tuberculous Diseases	...	...	...	...	...	...	...	1	...	...	1
Meningitis (not Tuberculous)	...	...	...	...	...	1	1	2	...	2	2
Convulsions	...	1	...	...	1	1	4	1	1	7	1
Laryngitis	...	...	...	...	...	..	...	...	...	...	...
Bronchitis	...	...	...	1	1	1	...	2	1	3	2
Pneumonia (all forms)	1	...	1	...	2	3	5	6	7	16	7
Diarrhœa Enteritis Gastritis	3	1	...	1	5	11	9	4	3	17	15
Syphilis	...	...	...	1	1	...	1	...	...	2	...
Rickets	...	...	...	..	...	...	...	...	1	1	...
Suffocation, overlying	...	...	...	...	...	...	...	...	...	...	...
Injury at Birth	1	...	...	...	1	...	...	...	...	1	...
Atelectasis	2	...	...	...	2	...	...	...	...	2	...
Congenital Malformations	11	2	1	2	16	2	...	3	...	9	12
Premature Birth	35	6	1	1	43	3	1	...	...	23	24
Atrophy, Debility and Marasmus	2	3	2	1	8	5	7	3	...	10	13
Other causes	7	1	1	1	10	1	2	1	3	10	7
Total	62	14	6	8	90	29	32	26	18	109	86

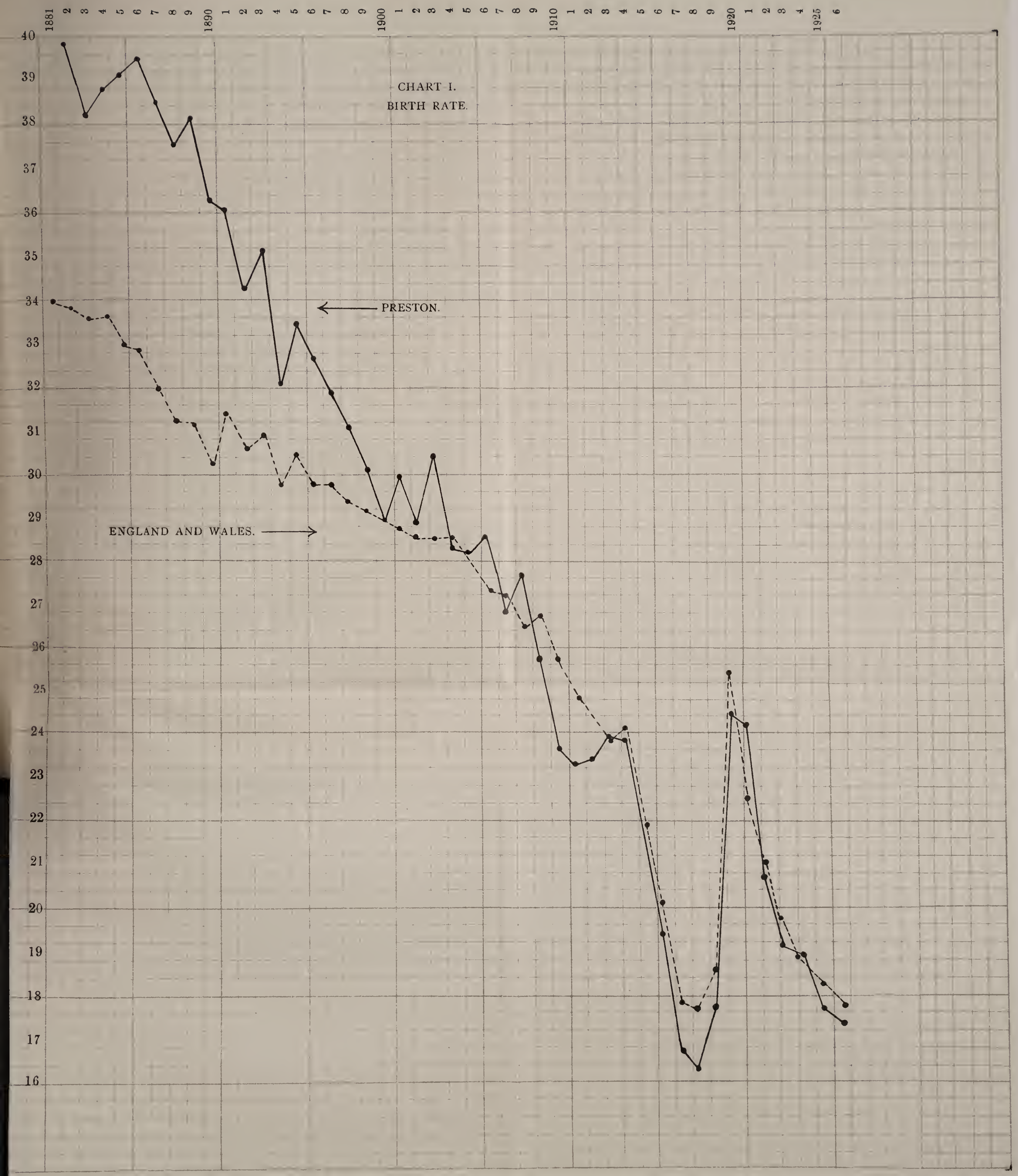

1881
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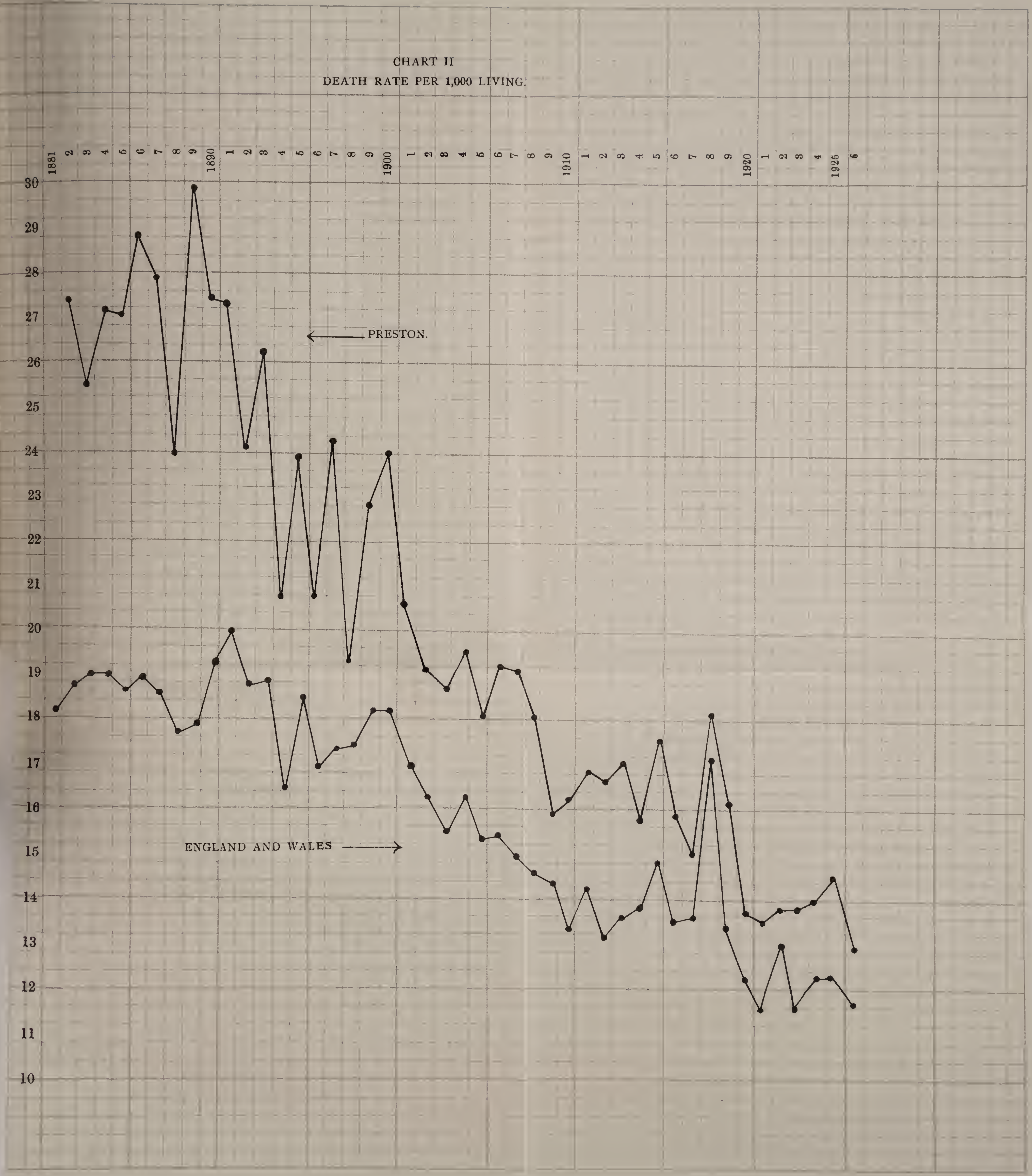
CHART I.
BIRTH RATE.
PRESTON.
ENGLAND AND WALES.

CHART II

DEATH RATE PER 1,000 LIVING.



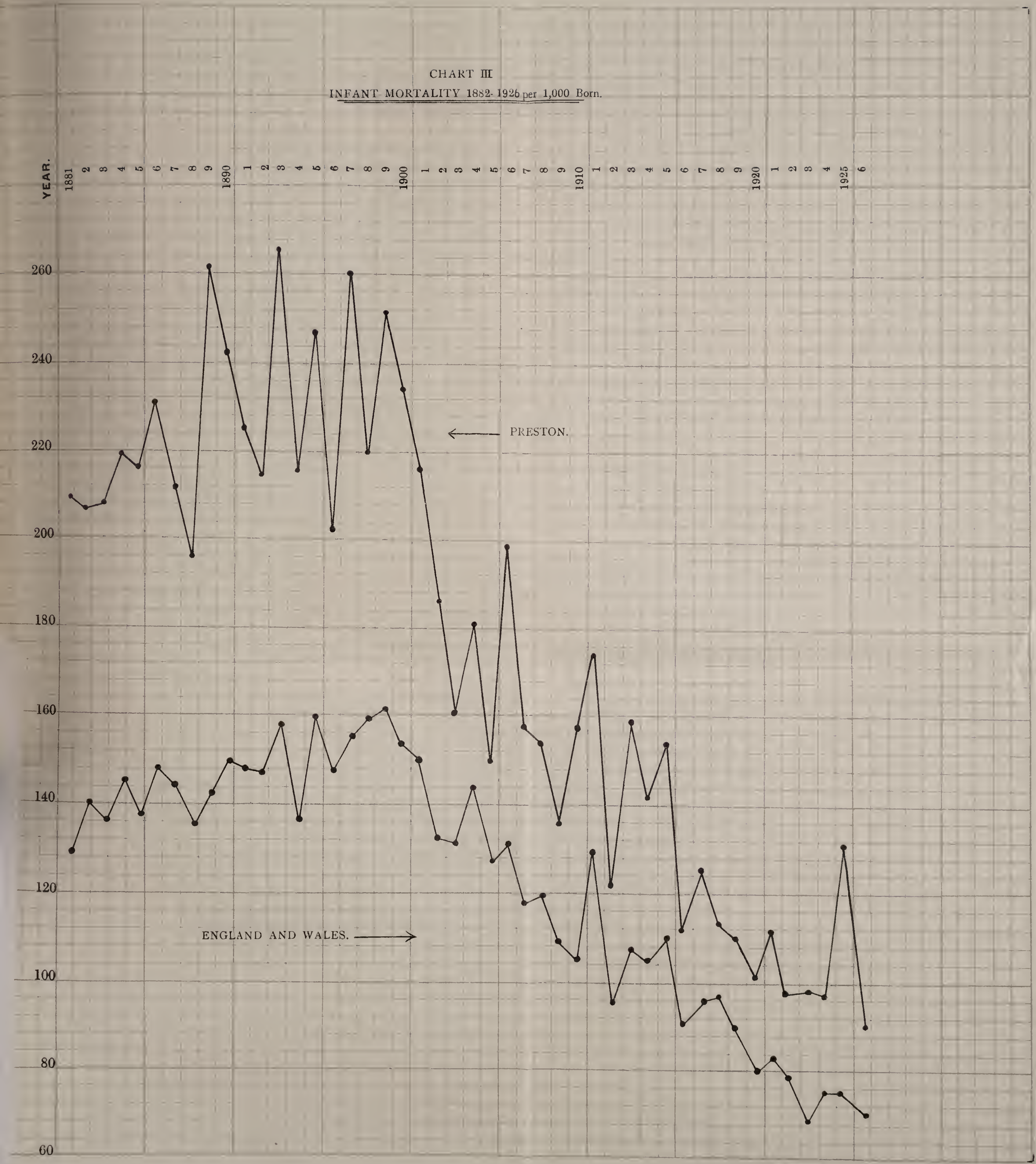


CHART III

INFANT MORTALITY 1882-1926 per 1,000 Born.

Other Diseases.

The deaths classified as Other Causes in the preceding Table may be further classified as follows :—

	Under 1 week	1—2 weeks	2—3 weeks	3—4 weeks	1—3 months	3—6 months	6—9 months	9—12 months	Total
Murder by Gas Poisoning	1	...	...	...	...	...	...	...	1
Want of attention at Birth	3	...	...	...	...	...	...	...	3
Haemorrhagia Neonatorum	1	...	...	...	...	...	...	...	1
Asphyxia	2		...	...	...	...	...	...	2
Icterus Neonatorum	...	1	...	...	...	...	...	...	1
Intestinal Obstruction	...	...	1	...	1	1	...	...	3
Pemphigus Neonatorum	...	...	...	1	...	...	...	...	1
Intussusception	...	...	...	...	...	1	...	2	3
Cellulitis of Neck	...	...	...	...	...	...	1	...	1
Endocarditis	...	...	...	...	...	...	...	1	1
Totals	7	1	1	1	1	2	1	3	17

PUERPERAL FEVER.

Twelve cases of Puerperal Fever, and eight cases of Puerperal Pyrexia were notified.

Among these there occurred eight deaths, four of which took place in the Preston Royal Infirmary, one at home, one at the Isolation Hospital, one at the Fulwood Poor Law Institution, and one at a Midwife's House.

Of the deaths which occurred at the Royal Infirmary, the whole labour was undertaken in the Institution in one instance, labour had been attempted outside and completed in the Infirmary in two instances, and in one instance had been completed before admission.

In the case of the deaths which took place at the Isolation Hospital, and the Fulwood Institution, birth had been completed before admission.

Of the total 20 cases of Puerperal Fever and Pyrexia, 11 were removed to the Isolation Hospital, among these. one died.

TABLE Vb.

Year.	No. of Births Registered	Puerperal Fever.				Other Accidents and Diseases of Pregnancy.		Total Mortality from Child Birth.
		No. of Cases Notified.	No. of Deaths.	Incidence per 1000 Births.	Mortality per 1000 Births.	No. of Deaths	Mortality per 1000 Births.	
1911	2726	6	2	2.20	0.73	13	4.73	5.50
1912	2753	2	1	0.72	0.36	4	1.45	1.82
1913	2888	7	2	2.42	0.69	6	2.08	2.77
1914	2841	7	2	2.46	0.70	20	7.04	7.74
1915	2546	9	5	3.53	1.96	7	2.75	4.71
Average	2751	6.2	2.4	2.26	0.89	10.0	3.61	4.51
1916	2315	3	3	1.29	1.29	3	1.30	2.59
1917	2019	1	1	0.49	0.49	5	2.47	2.96
1918	1906	3	2	1.57	1.05	4	2.10	3.15
1919	2086	9	5	4.31	2.39	4	1.92	4.31
1920	2984	16	9	4.69	3.01	13	4.36	7.37
Average	2262	6.8	4.0	2.47	1.65	6.0	2.43	4.08
1921	2811	8	7	2.82	2.49	8	2.85	5.34
1922	2482	8	3	3.22	1.20	9	3.63	4.83
1923	2426	8	3	3.30	1.24	8	3.30	4.54
1924	2328	8	5	3.40	2.15	8	3.43	5.58
1925	2174	8	6	3.68	2.76	7	3.22	5.98
Average	2444	8.0	4.8	3.28	1.97	8.0	3.29	5.25
1926	2160	*20	8	9.26	3.70	9	4.17	7.87

* Includes eight cases of Puerperal Pyrexia notified in the last three months of the year.

OTHER ACCIDENTS AND DISEASES OF PREGNANCY.

Nine deaths were notified from this cause compared with seven in the previous year. In three deaths the patient was admitted to the Royal Infirmary after prolonged attempts at delivery had been made at home, in one case the whole labour took place in the Institution, and in the fifth case the patient was removed there when labour was completed.

In three instances the patients died after delivery at home and in one instance after delivery at a midwife's house.

Of the total nine deaths occurring in the Royal Infirmary, it should be noted that five women were removed there after prolonged attempts at delivery had been made outside, and two deaths occurred in women in whose case delivery had been effected before removal.

Eight cases of Ophthalmia Neonatorum were notified compared with 14 in the previous year. All the children received prompt notification and careful attention, five were under the treatment of the Doctor and a District Nurse, and one each under the Doctor and Monthly Nurse, and Doctor respectively, and one was removed to the Isolation Hospital. All the children recovered their sight.

The year 1926 was marked by the Transference of the Snow Hill Clinic (Treatment, Massage and Dental) to No. 2, North Road, and the establishment there of a Central Maternity and Child Welfare Clinic. The two treatment Clinics for Minor Ailments on Tuesdays and Fridays were retained in their original form, as also the Massage and Dental Clinics. It is now possible under the present arrangements for mothers to consult daily and at practically any time during the day. Appointments can also be made for mothers who find it impossible to attend the ordinary outside Centres.

All the North Road Clinics have been well attended, though the numbers must compare unfavourably with those of the others. as only cases requiring special attention are referred there. Particular reference must be made to the growth of the Massage Clinic, which for the greater part of the year has had a waiting list of over 30. It is hoped during 1927 to re-organise this Clinic with the appointment of the present Masseuse (Miss Spencer) on a half time basis. The enthusiasm of the mothers, and the regularity of their bi-weekly attendances at this Centre, which amounted to 1,080 for the year, are worthy of the highest praise.

ANTE-NATAL CLINIC.

In April of this year a definite attempt to increase the activities of this Clinic was made by consultation with the Midwives. The utilities of the Clinic were defined and the necessities for ante-natal treatment explained. This resulted in a very satisfactory response with the result that the number of attendances and also the number of new cases has been doubled :—

	1925.	1926.
New Patients	73 ...	... 163
Attendances	163 ...	... 352

It is hoped to surpass these figures during 1927. The Midwives are keenly interested in the work and are now sending their patients for advice. One third of the total new cases were sent by Midwives. Routine physical examinations are made, patients and Midwives advised as to any possible difficulties. and arrangements for confinements are completed. Abnormalities, or patients with organic disease are recommended to the Royal Infirmary or Sharoe Green Maternity Home, and an attempt is being made to send all women expecting their first-born into Hospital. It is hoped in time to lower the Maternal Death Rate by this agency. Of the 163 new Cases, 14 were referred to the Venereal Diseases Department at the Royal Infirmary, and seven to the Sharoe Green Maternity Home. Of the 14 cases referred to the Venereal Diseases Clinic, eight were delivered of full-time healthy infants, and of the other six, four were not pregnant and two are still undelivered. As to the routine of the Clinic, patients are asked to attend once monthly to the seventh month, and fortnightly afterwards. One feels confident that in order to have a successful ante-natal Clinic with increasing numbers no examinations must be made at the first instance. Of the 163 new cases—137 were delivered of healthy babies, three stillbirths, and the rest left the Borough. There was only one maternal death, and this unfortunately occurred in a *prima para* who was advised to go into Hospital and refused.

INSPECTION OF MIDWIVES.

During the year there were 45 Midwives on the Register, 32 of whom were trained and the remainder bona-fide. The following inspections of Midwives were made :—

Routine 59. Special 16.

Two thirds of the Routine Inspections were made on the Districts, in the Midwives' Homes or on attendance at confinements.

LECTURES FOR MIDWIVES.

An interesting course of Lectures for Midwives was given during the Winter 1926-27 on the last Friday of each month at No. 2 North Road. These were exceedingly well attended considering this was the first session, and the average attendance was two-thirds of the number on the Roll. Towards the end of the session there were several applications from other Nurses in the town to be allowed to attend. The following Lectures were given :—

November : " Puerperal Pyrexia and the New Regulations."
By the Medical Officer of Health.

December : " A General Outline of Tuberculosis,"
By Dr. J. Walker.

January : " Syphilis and Gonorrhœa,"
By Dr. M. Lowry.

February : " The Value of Ante-Natal Treatment,"
By Dr. E. E. Critchley.

March : " Infant Feeding, with Special Reference to Midwives,"
By Dr. M. Harris, of Manchester.

INFANT WELFARE CENTRES.

The attendances for 1926 were well maintained. During the Winter a course of eight Lectures on Home Nursing was given by the Health Visitor at each Centre. This was followed by six Cookery Demonstrations. The following syllabus in Home Nursing was uniform for all the Clinics :—

(1) Personal Hygiene and the preparation of Infants' Food.

(2) Poultices and Fomentations.

(3) Burns and Scalds.

(4) Clothing, Cots, Sleep and Habits.

(5) Baths, The care of the Skin and Eyes, Skin eruptions.

(6) Dirt, Sepsis.

(7) How to treat an infectious case with special reference to Measles.

(8) Influenza, Measles, and Diarrhoea.

The social side of the Centres has been well maintained by the activities of the Preston Voluntary Workers' Association to whom our thanks are due. A successful " Baby Day " was held in the Park on July 5th under ideal weather conditions. There was a parade of decorated prams at which the Mayoress of Preston (Mrs. Woolley) kindly distributed the prizes. The inauguration of " Baby Day " as an out-door affair was much appreciated by the mothers.

BABIES HOME, FULWOOD.

The staff consists of Matron, Staff Nurse, two Maids and four Probationers. The latter give their services in return for one year's training in Nursery Nursing. Lectures are given during that time and an examination held by Dr. Walker, Hon. Physician, and if successful a certificate is given.

The number of children maintained by the Maternity and Child Welfare Committee in the Home averaged seven. One death occurred during the year the cause being dentition, convulsions and congenital disease. The children who have been free from any infectious outbreak, are suitably fed, are bathed daily, and also, when weather permits, are in the open air. The nursery windows are kept open day and night all the year round.

Legislative Acts which came into effect during the year. The main points are :—

(1) The Public Health (Notification of Puerperal Fever and Puerperal Pyrexia) Regulations, 1926.

In addition to Puerperal Fever, which was already a notifiable disease, it is now necessary for the Medical Practitioner to notify " Any febrile condition occurring in a woman within 21 days after childbirth or miscarriage in which a temperature of 100.4 degrees Fahrenheit (38 degrees Centigrade) or more has been sustained during a period of 24 hours or has occurred during that period."

The notification of both Puerperal Fever and of Puerperal Pyrexia has been scheduled by the Ministry of Health in such a manner that the medical practitioner is required to state whether he requires a second opinion on the case, to have a bacterial examination on the case, to have patient admitted to hospital, or trained nurses to be provided. The obvious effect of these regulations carried out in the spirit intended by those responsible for its drafting, will be to provide every facility for diagnosis and treatment at the time when such aid can be of its maximum value.

(2) Public Health (Ophthalmia Neonatorum) Regulations, 1926.

These regulations amend the regulations of 1914, under which an obligation rested upon a certified midwife to notify any case in which she had reasonable grounds for supposng that a child upon whom she was in attention, or whom she was called in to visit, in the course of her practice, was suffering from ophthalmia neonatorum, unless the case had already been notified by a medical practitioner. This system of dual notification resulted in many instances in a failure to notify. or much delayed notification. Under the regulations named above, the duty of notifying is placed entirely upon the shoulders of the medical practitioners. It is the midwife's duty to send for medical help and notify the Medical Officer of Health in every case of discharge from the eyes however slight.

(3) The Midwives and Maternity Homes Act, 1926.

The important points in this Act are the amendment of Section 1 of the Midwives Act, 1902, making it an offence for any person, not certified under this Act, to attend a woman in childbirth otherwise than under direct supervision of a duly qualified medical practitioner, unless in a sudden or urgent necessity. Under the 1902 Act it would be necessary to prove that the uncertified person attending was doing so " habitually or for gain." The effect of this Section should be materially to curb the action of unqualified midwives. Another important point deals with the registration of maternity homes ; hospitals and homes in the personal charge of a registered medical practitioner are excepted. The Local Authority are given powers to make bye-laws with respect to the keeping of records of patients and the notification to them of any death and the cause thereof occurring in a maternity home. Local Authorities are also empowered to establish contributory schemes of insurance against the payment of doctors' fees when called in by a midwife in an emergency.

TABLE Vc.

	Total No. of Births Registered	Nett Births	Nett Infant Deaths	Puerperal Fever		Deaths from other diseases of Pregnancy and Parturition
				Cases	Deaths	
Private Houses	1814	1804	154	4	1	3
Nursing Homes	44	18	2	...	1	...
Royal Infirmary	237	168	20	4	4	5
Isolation Hospital	...	...	6	3	1	...
Midwives Homes (four) ...	62	55	...	1	...	1
Other Institutions .... (Inward Transfers)	...	115	13	...	1	...
Total	2157	2160	195	12	8	9

TABLE Vd.

Attendance on Women at Child Birth.

E BIRTHS WERE ATTENDED BY :—	District 1	District 1a	District 2	District 3	District 4	District 5	District 6	Total	% 1925	% 1926
wives alone	147	153	263	225	176	182	55	1201	61	61
tors and Midwives	114	92	89	124	85	102	18	624	30	31
tors and Monthly Nurses ..	32	...	...	4	...	7	...	43	3	2
tors and Unqualified Women	13	12	32	6	15	12	9	99	6	6
TOTALS	306	257	384	359	276	303	82	1967		

TABLE Ve.

Notification of Births

Received from :—

District	Midwives	Doctors	Parents	Royal Infirmary	Private Nursing Homes	Total
1	264	2	23	35	1	325
1A	209	1	14	22	2	248
2	319	2	24	36	10	391
3	288	1	38	29	2	358
4	247	1	17	23	1	289
5	237	1	14	34	7	293
6	60	...	3	3	...	66
	1624	8	133	182	23	1970

The following scheme was put before the Committee and adopted. The scheme began on April 1st, 1927.

FEES OF DOCTORS CALLED IN BY A MIDWIFE.

Suggestions for an Insurance Scheme as empowered by Section 2 (3) of the Midwives Act, 1926.

(1) Under Section 14 of the Midwives Act of 1918, a midwife is required to call in a medical practitioner if an emergency arises. The Council is empowered by the same Act to pay the fee of a registered medical practitioner so called in and to recover in part or whole the fee so paid from the husband or the patient. The emgencies are carefully defined in the Rules of the Central Midwives Board (Rules E 20-25) and the fees payable are set forth in a schedule issued by the Ministry. This schedule is printed on the back of the account form furnished by the Council and forwarded to the doctors on receiving an intimation from them of the call by the midwife.

(2) In a certain number of cases (27 per cent. in 1925 and a similar proportion for the first nine months of 1926) where the patient and doctor prefer it, the call is treated and settled as a private matter. In the remainder the average payments by the Council are set out below.

It should be noted that the expectation in 1926 indicates a smaller average fee and a larger recovery with a consequent decrease in the net cost. The practice is, however, now probably stable and will not be subject to much variation.

	1924	1925	Estimated 1926
No. of Doctors called in	?	96	95
No. of Accounts paid by Council ...	47	70	75
Total amount	£112/7/-	£121/2/6	£120/-/-
Average Payment	£2/7/9	£1/14/7	£1/12/-
Total recovered	£18/16/-	Nil.	£30/-/-
Average recovered	8/-	Nil.	8/-
Average net payment by Council ...	£1/19/9	£1/14/7	£1/4/-

The administrative detail of ascertainment of the amount of income, the scale of income applied and the method of collection are familiar to your Committee and need not be gone into here.

(3) The details of the notification of births and the number notfiied by midwives is as follows :—

	1922	1923	1924	1925	1926	Est. 1927
Total notified	2350	2316	2265	2144	2000	1900
Total notified by Midwives ...	1974	1900*	1686	1639	1600	1575
Percentage	84%	82%	74.4%	76.4%	80%	83%

*Approximately.

(4) The problem consists of an estimation of (a) the number of births to be attended by midwives, (b) the number of these for whom medical aid may require to be summoned, and (c) the proportion of the cases attended by midwives who would be likely to contribute under any scheme which may be established by the Council.

(5) From the figures it appears that the total number of births is tending to decline and that the percentage of births attended by midwives has increased in the last three years although it has not yet reached the peak of 1922. It is very probable that the percentage of midwives' cases will in any event rise a little further with the midwives rising standard of skill and education of the public in the duties of the Council as to the provision of medical aid.

(6) Our experience in the last few years has been that a doctor has been sent for in an emergency in 6 per cent. of the midwives' cases and it is estimated that in 1927 the number of notified births will sink to 1900 and that the percentage of these notified by midwives will rise from 80 to 83.

(7) The figures for 1927 will then be :—

Estimated number of births	1900
No. attended by Midwives	1575
No. of emergency calls	95

(8) The amount of the contribution to be paid by those desirous of availing themselves of a contribution scheme does not depend upon the number doing so as the Council average liability, if it remains constant as the average experienced in 1926, will as shewn in paragraph 2 be £1 12s. od. per case. It does. however, depend upon the percentage of doctors' calls made by midwives. If the doctors' services are required in 1 per cent. of the contributory cases it follows that the average cost per case would be 1 per cent. of £1 12s. od., that is £0.016, which is equivalent to approximately 4d. per case. The following table illustrates the growth in the contributions which would be required as the percentage of cases requiring medical assistance rises.

Percentage of Contributors requiring Medical Assistance	Average cost per case	
	£	
5	0.08	= 1/8
6	0.096	= 1/11
7	0.112	= 2/3
7·5	0.120	= 2/5
8	0.128	= 2/7
9	0.144	= 2/11
10	0.16	= 3/2
11	0.176	= 3/6
12	0.192	= 3/10
13	0.208	= 4/2
14	0.224	= 4/6
15	0.24	= 4/10
16	0.256	= 5/1
17	0.272	= 5/5
18	0.288	= 5/9
19	0.304	= 6/1
20	0.32	= 6/5
21	0.336	= 6/9
22	0.352	= 7/-
23	0.368	= 7/4
24	0.384	= 7/8
25	0.4	= 8/-

(9) Although our experience is that medical aid is sought in 6 per cent. of the cases attended by midwives, it is probable that the knowledge that medical aid would be available in insured cases without additional cost to the patient would cause an increase in the number of calls and I suggest that 11—12 per cent. for the first year of operation would be a reasonable expectation, i.e., a contribution fee of 3s. 6d.

(10) It must be confessed that the argument is based upon very slender data, and that the amount of the contribution in the two districts where the scheme is working (Counties of Hampshire and Somerset) is higher than the experimental figure suggested in this memorandum.

In Hampshire the doctors were sent for in emergencies as follows :—

	1922-3	1923-4	1924-5	1925-6 (estimated)
Percentage	17.6	19.1	21.6	21.3

and the Medical Officer of Health estimates the figures for 1927-28 at 23 per cent. against our modest 6 per cent. at present, and forecasted 11-12 per cent. It is obvious that the introduction of a scheme is the only means of ascertaining the facts. A widely-advertised scheme will still leave the cost of non-contributory persons where it now is and will reduce the cost of the contributors to nothing.

INFANT WELFARE CENTRES.

The attendances at the Centres have increased during the year. The actual numbers will be seen in the table below.

The growth of the work is indicated by the following statement of attendances at the Centres since 1916 :—

TABLE Vf.

Situation of Centre	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926
Deepdale Mill Street	1139	1471	1836	1741	2722	3318	3509	4024	4137	4072	4277
Walker Street	1573	3051	2536	2398	2850	2824	4150	5233	5728	5965	5732
Fylde Road	984	1771	2402	1543	2648	2732	2338	2889	3322	2929	3783
Edward Street	...	72	1280	997	754	1639	1896	2362	3345	3261	3816
Manchester Road ...	260	1435	1774	1811	1991	2507	2488	2990	4509	3892	3980
North Road	...	...	...	83	203	180	384	397	386	163	352
Totals	3956	7750	9828	8573	11168	13200	14765	17895	21427	20282	21940

TABLE Vg.

Number of Attendances at Maternity and Child Welfare Centres and at the Ante-Natal Clinic.

Situation of Centre	Total Infants (a)	New Infants included in (a) (b)	Older Children	Expectant Mothers	Total Attendances
Deepdale Mill Street .	3322	255	749	206	4277
Walker Street	4242	236	1301	189	5732
Fylde Road	2689	271	922	172	3783
Edward Street	3067	205	601	148	3816
Manchester Road	3031	206	849	100	3980
Ante-Natal Clinic, North Road	...	...	...	352	352
Totals	16351	1173	4422	1167	21940

Five hundred and ninety persons received free food in the form of cows milk or dried milk from the Corporation. The total amount involved was £1,244 14s. 4d. and the average cost per head equalled £2 2s. 3d. or £1 1s. 3d. less than in 1925. The investigation of the income of applicants and the administration of the scheme, together with that relating to the provision of Home Helps, Midwives and Doctors, absorbs a tremendous amount of work on the part of the staff and the responsible Sub-Committee. At each monthly meeting over 200 individual cases have to be considered with full reports on each. Co-operation with the Board of Guardians, the Pensions Committee, the Employment Exchange, the Friendly Societies and charitable agencies is maintained by diligent enquiries and collation of information.

Three hundred and sixty-three cases were taken off the list during 1926 on account of improvement in circumstances, death or removal. On the average these cases received free milk for 190 days each, and the shortest length of time occurred in emergency grants covering the interval between the fortnightly meetings of the Committee. The longest were periods of nearly three years. A summary is appended.

In addition to the provision of milk, dried milk, Ovaltine, etc., necessitous cases were further helped by the provision, by the Council, of a doctor, midwife or home help, at confinement in 187 cases free of charge, whilst in 20 cases the person applying for assistance was required to pay a portion of the cost.

On medical grounds 13 cases were advised to go into the maternity wards of the Preston Royal Infirmary for confinement, and for similar reasons, or because of inadequacy of accommodation at home, seven cases were sent to the Sharoe Green Maternity Home. In ten cases the whole cost was borne by the Council, whilst in an equal number of cases the applicant was required to pay a portion of the cost as arranged by the Sub-Committee.

Full particulars of the applications received in respect of the various services rendered at confinement and the Sub-Committee's decision are given below in tabular form.

Emergency Calls by Midwives for Medical Assistance

(Midwives Acts, 1902 and 1918).

Year.	No. of Applications to be helped to pay. Doctor's Accnt	Whole Cost Granted.	Part Cost Granted.	Not Granted.	Cost Borne by Council.	Cost Borne by Applicant.	Average Cost per instance.
1924	47	37	Nil.	10	£93 11 0	£18 16 0	£2 7 9
1925	70	60	2	8	£121 2 6	Nil.	£1 14 7
1926	76	63	5	8	£121 14 6	£11 7 6	£1 15 0

Services of Midwives.

Year.	No. of Applications for Sevices of Midwife.	Whole Cost Granted.	Part Cost Granted.	Not Granted.	Cost Borne by Council.	Cost Borne by Applicant.	Average Cost per instance.
1924	137	115	Nil.	23	£146 10 0	Nil.	£1 5 6
1925	121	92	10	19	£127 1 3	£2 11 3	£1 5 5
1926	144	115	10	19	£154 0 3	£5 12 9	£1 5 6

Services of Home Helps.

Year.	No. of Applications for services of Home Help	Whole Cost Granted.	Part Cost Granted.	Not Granted.	Cost Borne by Council.	Cost Borne by Applicant.	Average Cost per instance.
1924	40	31	4	5	£89 15 0	£3 0 0	£2 11 6
1925	46	29	6	11	£88 5 9	£3 3 0	£2 12 2
1926	17	9	5	3	£28 15 9	£9 4 0	£2 14 11

Beds at the Sharoe Green Maternity Home.

Year.	No. of Applications for Bed.	Whole Cost Granted.	Part Cost Granted.	Not Granted.	Cost Borne by Council.	Cost Borne by Applicant.	Average Cost per instance.
1926	8	3	$\frac{1}{4}$ cost in 1 case; Maternity Benefit to be paid in 3 cases.	1	£30 16 6	Nil.	£5 2 9

Beds in the Maternity Ward at the Royal Infirmary.

Year.	No. of Applications for Bed.	Whole Cost Granted.	Part Cost Granted.	Not Granted.	Cost Borne by Council.	Cost Borne by Applicant.	Average Cost per instance.
1926	15	7	$\frac{1}{4}$ cost in 2 cases; $\frac{3}{4}$ cost in 2 cases; Maternity Benefit to pay in 2 cases	2	£62 13 10	£16 14 6	£6 2 2

DENTAL TREATMENT.

The number of cases attending for treatment was 105. Of these 56 were children.

In 80% of cases treated, the teeth were in a hopelessly carious condition, even in children at 2½ years. The dental condition was in such a state of neglect that little could be done except to extract them, hence the higher percentage of extractions over fillings.

Every endeavour is being made in conjunction with the Medical Department to instruct the mothers both at the clinics and in their homes with respect to the proper care of the teeth both of themselves and their children.

The carious condition of the temporary dentition of the child is largely due to a faulty dietary of the expectant mother. It is hoped that with an improvement of the calcium and phosphorous content of the diet the teeth of future children will be more resistant to caries, and that the temporary teeth—upon whose condition depends to a great extent the proper development of the jaws and face—will be enabled to perform their proper function over a longer period, and retain the proper spaces for the permanent dentition which follows.

The mothers are provided with artificial teeth when the necessary fillings, extractions and cleaning has been carried out. Payment is made partly by patients and partly by the Committee.

By getting the mother's mouth into a clean and healthy condition, it is hoped to see a great improvement in the dental and general health of future children.

Much could be done by the printing and distribution of pamphlets and posters concerning the care of the teeth.

Dentures were provided in 13 cases, particulars of which as to cost are given below.

No. of Applications for Dentures	No. of Applications			Cost borne by	
	Not Granted	Granted Free	Part Cost Granted	Applicant	Council
				£ s. d.	£ s. d.
13	2	1	10	10 0 0	33 15 0

The following figures show the number of patients who attended the Dental Clinic, the number of attendances made by them, and also the character of the dental work performed.

Number of extractions	...	308	Average number per session ...	6.42
Number of fillings ...	...	142	,, ,, ,, ...	3.00
Number of dressings	...	227	,, ,, ,, ...	4.80
Number of scalings	...	147	,, ,, ,, ...	3.00
Dentures provided ...	...	10		

Total attendances, 487. Number of Mothers attended, 49.

Number of Children attended, 55.

Tabular Statement of Number of Persons in receipt of Free Milk during 1926 and the length of time for which it was made available (completed cases only).

Months	Persons	Months	Persons	Months	Persons
1	52	13	5	25	4
2	56	14	3	26	1
3	53	15	2	27	..
4	31	16	3	28	3
5	23	17	3	29	2
6	18	18	4	30	1
7	17	19	3	31	..
8	23	20	5	32	1
9	11	21	4	33	..
10	14	22	3	34	..
11	7	23	2	35	1
12	4	24	4	36	..

TABLE Vh.

Statement of Sale of Foods and Free Supplies during the year 1926.

	Value of Foods Sold			Value of Foods Supplied Free		
	£	s.	d.	£	s.	d.
Cows Milk	Nil.			983	17	11
Dried Milk	674	14	11	216	19	3
Lactogol	4	11	3	0	10	0
Virol	90	16	0	20	4	0
Ovaltine...	268	12	1	12	17	6
Cod Liver Oil Emulsion	39	14	1	7	5	3
Cod Liver Oil and Malt	9	11	11	2	15	11
Parish's Chemical Food	4	16	9	0	4	6
Total	1092	17	0	1244	14	4

	1926			1925			1924			1923			1922		
	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
Value of Foods Sold.	1092	17	0	1114	17	0	958	10	6	1039	7	0	1075	6	2
Value of Foods Supplied Free	1244	14	4	1556	4	6	1509	10	8	932	4	1	576	0	3

TABLE Vi. SUMMARISED STATEMENT OF THE WORK OF THE HEALTH VISITORS.

District	Wards	Visits to															
		Ante-Natal Cases	Births		Older Children				Disease Conditions								Total Visits
			1st Visits	Re-Visits	1—2 years	2—3 years	3—4 years	4—5 years	Ophthalmia Neonatorum	Puerperal Fever	Pneumonia	Measles	Whooping Cough	Mumps, Chicken Pox, etc.	Epidemic Enteritis	Erysipelas	
1	Fishwick .... Ribbleton	137	306	1104	640	409	344	627	...	5	9	9	21	40	...	12	3663
1A	Deepdale .... Park (part of) ...	141	257	905	660	367	262	208	2	1	9	8	34	79	...	3	2936
2	Park (part of)...... Trinity	127	384	997	596	632	493	503	9	3	20	9	5	100	40	2	3920
3	St. Peter's .... Moorbrook	237	359	1572	369	458	361	438	2	15	4	53	9	123	...	...	4000
4	Christ Church ... Ashton	157	276	1009	566	598	560	356	6	1	22	37	12	70	11	12	3693
5	St. John's .... Avenham	165	308	1078	577	391	320	358	20	...	5	48	57	178	19	1	3525
6	Maudland..........	22	82	597	355	355	266	229	5	1	6	9	30	23	14	3	1997
	Totals	986	9234		12298				1216								23734

VI.—Sanitary Administration.

(1) STAFF.

F. A. Sharpe, M.D.(Lond.), B.S., D.P.H.
Medical Officer of Health, School Medical Officer, Port Medical Officer, Tuberculosis Officer.

James Walker, M.B., Ch.B., D.P.H., Vict.
Assistant Medical Officer, Clinical Tuberculosis Officer.

E. E. Critchley, M.B., Ch.B.,
Assistant Medical Officer, Maternity and Child Welfare Officer.

Richard Finch, F.R.C.V.S., D.V.S.M., Veterinary Officer and Officer in charge of Food Inspection arrangements.

W. H. Roberts, F.I.C., Borough Analyst.

Chief Clerk : W. Sharp.

Matron, Isolation Hospital : J. G. Booth.

Matron, " Chestnuts " Hospital for Consumption : F. Keene.

Health Visitors : M. M. Bottomley, E. A. Cooper, L. Ross, E. Park, D. Lafferty, J. Mortimer, R. Cole.

Tuberculosis Nurses : J. Edmondson, M. Cole.

Sanitary Inspectors : W. Baron, Cert. R.S.I. E. L. Crossthwaite, Cert. R.S.I. H. S. Holden, Cert. R.S.I. H. D. Wright, Cert. R.S.I. J. B. Morgan, Cert. R.S.I. H. Hornby, Cert. R.S.I. A. S. Williams, Cert. R.S.I.

(2) HOSPITAL ACCOMMODATION.

The Hospital is a modern institution, consisting of an administration block, four ward blocks, laundry, and other necessary premises.

The ward blocks contain two main wards and two side wards each. The accommodation is for 60 beds.

During the year 360 cases were admitted, compared with 510 in 1925 and 374 in 1924.

In addition to Enteric Fever, Scarlet Fever, and Diphtheria, a large number of cases of other illnesses were treated.

THE ISOLATION HOSPITAL.

Cost.—The following figures are taken from the Borough Treasurer's Abstracts and Annual Reports :—

	Expenditure	Income
	£ s. d.	£ s. d.
1923–24	6974 16 0	94 11 2
1924–25	7424 4 1	323 2 2
1925–26	8602 0 9	183 17 5

The cost in 1925-26 was increased by the re-organisation of the laundry, £890, and the alteration of one of the blocks to meet the needs of the Port Sanitary Authority, £382.

ENTERIC FEVER.

Six cases were admitted, as compared with four in 1925, and 12 in 1924. All six presented symptoms of mild Enteric and upon submission of blood samples to the Pathologist were reported to be suffering from Paratyphoid infection. All recovered.

SCARLET FEVER.

Ninety-eight cases were admitted, as compared with the high figure of 266 in 1925 and 188 in 1924. The diagnosis was confirmed in 93 of these. The cases were mild in nature and all recovered. These results compare very favourably with the figures of 1925 when seven cases or 2.6 per cent. of the cases admitted met with a fatal termination.

There were two return cases. A child (case 76) was discharged from the Hospital on November 16th, and on November 22nd two other children in the house became infected and were removed to the Isolation Hospital (cases Nos. 89 and 90).

DIPHTHERIA.

One hundred and seventy-seven cases were admitted, compared with 198 in 1925. There were six deaths, as against 16 in 1925. Amongst the cases admitted with Laryngeal obstruction, five required tracheotomy, with three recoveries. The remaining three fatalities were due to diphtheritic paralysis, involving the heart.

MEASLES.

Four cases were admitted—all recovered.

ERYSIPELAS.

Three cases were admitted—all recovered.

PNEUMONIA.

Twelve cases were admitted, of whom six were discharged, four died and two remained in hospital after the end of the year.

PUERPERAL FEVER.

Eleven women were admitted, of whom ten recovered and one died. The cases could be further classified as—

Septic abortion	2
Parametritis	1
White leg	2
Puerperal septicaemia	6

The cases in the first three groups were not notified as Puerperal Fever. The total number of cases notified was 12, among which eight deaths occurred.

ENCEPHALITIS LETHARGICA.

One case was admitted which upon observation was found to be a case of confusional insanity. The patient made a quick recovery.

OTHER DISEASES.

There were 48 cases admitted among which eight deaths occurred. With the exception of two adults, all the cases were young children and mostly infants.

The cases comprised :—

Tubercular Peritonitis	3	Bronchitis	1
,, Meningitis	3	Chicken Pox	1
Marasmus	23	Ophthalmia Neonatorum ...	1
Rickets	5	Blepharitis	2
Acute Anterior Poliomyelitis ...	1	For observation	1
Diarrhoeal Diseases	3	Anthrax	1
Heart Disease	1	Mental Illness	1
Vaccinia	1		

The chief group is the one comprising the wasting diseases of infancy. The experience gained by the Nurses in the care of these tender plants—the preparation of suitable diets, the periodical weighing, and the correct methods of dressing and bathing—is of great value to them.

TABLE VIa.

Disease	In Hospital Dec. 31, 1925	Admitted		Dis-charged	Deaths	Remaining Dec. 31, 1926
		No.	Per cent of Cases Notified			
Enteric Fever	...	6	75	6	...	...
Scarlet Fever...	15	98	80	108	...	5
Diphtheria......	9	177	82.3	174	6	6
Measles	...	4	2.5	4	...	...
Erysipelas	...	3	...	3	...	...
Pneumonia ...	...	12	...	6	4	2
Puerperal Fever	...	11	91	10	1	...
Encephalitis Lethargica...	...	1	...	1	...	...
Other Diseases	2	48	...	39	8	3
TOTALS	26	360	...	351	19	16

TABLE VIb.

Length of stay in Hospital of Patients who died or were discharged in 1926 whether admitted in that year or previously.

Disease for which admitted.	No. of Cases Died or Discharged during 1926	Total Days in Hospital	Average length of stay in days	Corresponding Figures for :			
				1925	1924	1923	1922
Enteric Fever	6	152	25·33	18·00	19·33	20·00	25·22
Scarlet Fever	108	3721	34·45	33·15	34·60	32·66	35·86
Diphtheria	180	4231	23·50	21·67	25·89	23·00	30·44
Measles	4	52	13·00	15·38	18·73	40·50	17·33
Erysipelas	3	49	16·33	8·16	17·5	7·50	...
Pneumonia	10	226	22·6	27·0	22·5	13·5	...
Puerperal Fever	11	239	21·72	8·14	10·40	14·00	38·00
Encephalitis Lethargica	1	8	8	14·0	26·75	5·00	...
Other Diseases...........	47	1035	22·02	17·13	32·66	...	...
Total	370	9713	26·25	27·22	29·7	27·63	32·87

TABLE VIc.

Disease for which Admitted.	Total Days in Hospital in 1926	Average Beds occupied daily	Corresponding Figures for : 1925	1924	1923	1922
Enteric Fever	152	0·41	0·19	0·63	0·81	0·52
Scarlet Fever	3653	10·0	24.40	17·77	17·27	18·49
Diphtheria	4161	11·4	12·73	7·62	7·32	9·81
Measles	52	0·14	1·03	2·99	0·99	0·98
Erysipelas	49	0·13				
Pneumonia	226	0·63				
Puerperal Fever	239	0·65				
Encephalitis Lethargica	8	0·02				
Other Diseases	1058	2·9				
Totals	9598	26·3	38·93	29·01	26·40	29·8

TABLE VId.

Ultimate diagnosis of cases admitted in 1926.

Disease for which admitted	Actual Disease found: TOTAL ADMITTED	Original Diagnosis verified	Sc. Fever & Whoop. C.	Follicular Tonsillitis	Septic Rash	German Measles	No evidence of disease	Diph. & Scarlet Fever	Diph. & Measles	Diph. & Chicken Pox	Scarlet Fever	Non-Diphtheritic Tonsillitis
Enteric	6	6	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	98	93	1	1	1	1	1	...	...	...	...	...
Diphtheria	177	126	...	...	...	...	13	2	1	2	5	28
Measles	4	4	...	...	...	...	...	...	...	...	...	...
Erysipelas	3	3	...	...	...	...	...	...	...	...	...	...
Pneumonia	12	12	...	...	...	..	...	...	...	..	...	...
Puerperal Fever	11	11	...	...	...	...	...	...	...	...	...	...
Encephalitis Lethargica	1	1	...	...	...	...	...	...	...	...	...	...
Other Conditions	18	48	...	...	...	...	...	...	...	...	..	...
TOTALS	360	304	1	1	1	1	14	2	1	2	5	28

VII.—Housing.

That portion of the work of the Public Health Department relating to the fitness of dwellings has been dealt with in Section II. A summary appears in the appended Schedule :—

In the Inspections under the Housing Regulations, 1910, attention is directed to the number of rooms per house, and the number of persons occupying them. The following are the facts elicited :—

Enquiries re Housing—482. Total Occupants—2,139.

TABLE VIIa.

No. of Rooms per House.	Number of Persons per House.												Total.	
	1	2	3	4	5	6	7	8	9	10	11	12		
	No. of Families.												Houses.	Occupants.
1 Room ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
2 Rooms ...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
3 Rooms ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
4 Rooms ...	8	27	38	37	40	34	10	4	4	1	1	1	205	899
5 Rooms ...	5	8	15	21	26	12	7	5	1	3	...	...	103	480
6 Rooms ...	3	22	24	26	21	15	12	7	3	1	...	...	134	595
7 and over ...	2	4	9	6	9	6	2	1	...	...	...	...	39	164
Total Families ...	19	61	86	90	96	67	31	17	8	5	1	1	482	...
Total Persons ...	19	122	258	360	480	402	217	136	72	50	11	12	...	2139

The figures above the heavy lines represent families living under conditions of overcrowding, that is, more than two persons per room.

The table shows no evidence of gross overcrowding, the average number of persons per house being 4.44, as compared with 4.26 at the 1921 Census; 7 houses (1.45 per cent.) were overcrowded. The occupants of these overcrowded houses numbered 69 or 3.2 per cent. of the whole; the corresponding figure at the 1921 Census was 7.4.

The Census for 1921 gives the population of the Borough as 117,406, an increase of 293 since 1911. The Registrar-General estimates the population in the middle of 1926 to be 124,200 or 1,300 more than in 1925, and an increase since 1911 of 6,774. The natural increase, that is the excess of Births over Deaths, was 8,371.

The houses erected since the 1911 Census are shewn below to amount to 2,576, which on the basis of 4.31 persons per house—the density at the 1921 Census—is sufficient to house 11,103 persons, and more than allows for the natural increase.

No. of Houses built each year 1911 to 1926.

Year.	No.
1911	193
1912	143
1913	142
1914	118
1915	95
1916	45
1917	19
1918	2
1919	1
1920	13
1921	8 + 226 by the Council.
1922	33 + 244 ,, ,,
1923	50
1924	186
1925	367 + 190 ,, ,,
1926	248 + 253 ,, ,,
	1663 + 913 ,, ,,

The following information has been extracted from the minutes of the Housing Committee for January, 1927 :—

HOUSING ACT, 1925.

Amount of advances to 31st March, 1926.	£124,618 0s. 0d.
Total amount of advances to date...	£263,023 17s. 0d.
Amount outstanding at date	£246,850 6s. 7d.
No. of houses	576

SMALL DWELLINGS ACQUISITION ACTS.

Amount of advances to 31st March, 1926	£160,069 0s. 0d.
Total amount of advances to date...	£187,227 0s. 0d.
Amount outstanding at date	£171,569 8s. 8d.
No. of houses	562
No. of Subsidy houses in respect of which Certificate " A " has been issued ..	1,129
No. of Subsidy houses competed ...	850

HOUSING SCHEDULE.

Number of new houses erected during the year :—

(a) Total	501
(b) As part of a municipal housing scheme	253

1.—Inspection.

Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	5392
Number of dwelling-houses which were inspected and recorded under the Housing (Inspection of District) Regulations, 1910	482*
Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation...	—
Number of dwelling-houses (exclusive of those referred to in the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	5126

* Included in 5,392 above.

2.—Remedy of Defects without Service of Formal Notices.

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	4376

—Action under Statutory Powers.

(a). Proceedings under section 3 of the Housing Act, 1925.

Number of dwelling-houses in respect of which notices were served requiring repairs	...
Number of dwelling-houses which were rendered fit—	
(a) by Owners	...
(b) by Local Authority in default of owners	...
Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners intention to close	Nil.

(b). Proceedings under Public Health Acts.

Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	98
Number of dwelling-houses in which defects were remedied—	
(a) by Owners	97
(b) by Local Authority in default of owners	...

(c). Proceedings under sections 17 and 18 of the Housing, Town Planning, &c., Act, 1909.

Number of representations made with a view to the making of Closing Orders	...
Number of dwelling-houses in respect of which Closing Orders were made	...
Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit	...
Number of dwelling-houses in respect of which Demolition Orders were made	...
Number of dwelling-houses demolished in pursuance of Demolition Orders	...
Number of dwelling-houses voluntarily demolished	4

COUNTY BOROUGH OF PRESTON.

THE SCHOOL MEDICAL SERVICE.

ANNUAL REPORT

For the Year ending 31st December, 1926.

The Medical Service Sub-Committee of the Education Committee,

THE CHAIRMAN OF THE EDUCATION COMMITTEE (Mr. Alderman Snelham).

THE VICE-CHAIRMAN OF THE EDUCATION COMMITTEE (Mr. Councillor Firth).

THE CHAIRMAN OF THE HIGHER EDUCATION SUB-COMMITTEE
(The Rev. Canon Morris).

THE VICE-CHAIRMAN OF THE HIGHER EDUCATION SUB-COMMITTEE
(Mr. Councillor Collinson, M.D., F.R.C.S.).

THE CHAIRMAN OF THE ELEMENTARY EDUCATION SUB-COMMITTEE
(Mr. Councillor Adkins).

THE VICE-CHAIRMAN OF THE ELEMENTARY EDUCATION SUB-COMMITTEE
(Mr. Councillor Ley).

MR. COUNCILLOR DURHAM.
MR. COUNCILLOR HERBERT.
MRS. COUNCILLOR A. M. PIMBLETT.
MR. COUNCILLOR THOS. PARKINSON.
JAMES YATES, ESQ.
T. F. WILSON, ESQ.

J. J. RAWSTHORN, ESQ.
MISS McCOURTY.
MRS. MEGAHY.
MRS. HINDMARSH.
THE REV. G. CANNING.

I.—Officers :

Superintendent School Medical Officer : F. A. SHARPE, M.D., B.S., D.P.H.

Assistant School Medical Officers : ELIZABETH ROSE, M.B., Ch.B., F. C. S. BRADBURY, M.B., B.Ch., B.A.O.

Dental Surgeons : E. HUTSON, L.D.S., R.C.S., Eng., T. H. WIGNALL, L.D.S., R.C.S., Eng.

School Nurses : MARGARET E. MARSDEN, AMY BUTTERFIELD, MAY SINGLETON, GERTRUDE WHALLEY, MARY E. BOOTH.

Dental Nurse : ANNIE L. WHITEHEAD.

Clerical Staff :

T. GRAY. C. BLAKELEY.

TO THE CHAIRMAN AND MEMBERS OF THE EDUCATION COMMITTEE.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit the annual report upon the Medical Inspection of School Children for the year 1926.

There has been no change in the scope of the work during the year but proposals for the supervision and treatment of crippled children have been approved by the Committee and are now before the Board of Education. Proposals for the installation of artificial sunlight treatment for children at the Open Air School have also received your approval and should shortly be in operation. The results of a full year's work with the increased medical and dental staff are reflected in the larger volume of work accomplished. In addition to the work described in the report, the staff undertook, on behalf of the Board of Education, a large number of minute observations on the physical characteristics including the height, weight and other measurements of a number of children for the purpose of an anthropometric survey which the Board is carrying out.

The excellent results obtained at the Open Air School are subjected to a careful analysis, which merits careful attention.

The question of accommodation for offices and central clinic is getting more pressing as the volume of the work grows. The present clinic is admirably situated as regards access, but it forms part of a public building and therefore renders control of the children difficult. The staff and children are crowded and there is no separate sanitary convenience for either.

There were no changes in the staff during 1926, but Mr. Wignall left the Service in January of this year in order to join the County Medical Officer's staff; Miss Whitehead, Dental Attendant, left in March, 1927, on superannuation, and Miss Singleton, School Nurse, joined the County Medical Officer's staff in May, 1927. They deserved well of the Committee and carry with them the hearty good wishes of their colleagues.

Mr. Wignall was replaced by Miss Radcliffe, L.D.S.

I have to thank the Assistant Medical Officers, the Dental Surgeons, Nurses and Staff for their loyal and painstaking work.

I am,
Your obedient Servant,
F. A. SHARPE,
Medical Officer of Health and School Medical Officer

Public Health Department,
Tithebarn Street,
Preston.

2.—CO-ORDINATION.

The co-operation between the various branches of the Public Health Service and the School Medical Service is most cordial and one is glad of the opportunity of thanking especially the Maternity and Child Welfare Department for their willing helpfulness. The arrangements for the transfer of records and exchange of information are as described in previous reports.

3.—SCHOOL HYGIENE.

SANITARY CONDITION OF SCHOOLS.

A survey of all the Public Elementary Schools in the area was made in 1926, the results being entered on cards specially designed for the purpose.

Most of the schools are in a satisfactory state of repair, but few of them are in keeping with modern ideas of school buildings.

In too many instances a large room is made to serve as a classroom for several classes, by the use of small movable partitions.

Cloakroom accommodation is usually rather inadequate, and in most cases no special provision is made for the drying of wet clothing.

Ventilation resolves itself too often into a choice between draughts and stuffiness, whereas in a perfect system neither inconvenience need be present. In many of the schools the movable part of the window which forms the means of ventilation is high up and inaccessible except by a length of window cord. If the window sticks or the cord breaks, the amount of ventilation is liable to be defective for an indefinite period.

The heating of the schools in nearly all cases is done by means of low pressure hot water systems, occasionally supplemented by open fires. In a few cases the boilers appear to be started too late in the day to have the schools adequately warmed by 9 a.m.

Closet and urinal accommodation leaves much to be desired, for apart from actual structural defects, the design of many of them is so antiquated and awkward that there can be no incentive to make or keep them clean and tidy. In most cases, however, the best use is being made of what facilities there are.

At the best of times the amount of sunshine finding its way into the classrooms is meagre, owing to the design of the schools and the proximity of other buildings. The trouble is accentuated in many instances by dirty windows, and windows of obscured glass where clear glass might be used. The more frequent cleaning of school windows is a matter requiring attention, with the knowledge that by so doing the health of the children would be definitely benefited.

Most of the schools have electric light. Gas has the double objection of giving a poorer light (with the fittings generally used) and the tendency for leakage to occur and vitiate the atmosphere.

Playground accommodation is far from satisfactory: in a few instances there is none at all. In others the size, surface, slope or drainage of the playground leaves much to be desired.

In cases where a school is used also for night classes, it is very desirable that thorough ventilation of the building be secured immediately the night classes conclude. This is a matter which is especially likely to be neglected, but which has important effects on the atmospheric condition of the school on the following day.

There are some very satisfactory school buildings in the area, and it is to be hoped that as funds are available some of the most objectionable of the present buildings will gradually be replaced.

The number of schools, their accommodation and average attendance for the year are as follows:—

	Number of Schools.	Recognised Accommodation.	Average attendance for year ended 31st March, 1926.
Church of England	19	13170	6752
Roman Catholic	10	9680	6129
Nonconformist	7	2933	1941
Council	4	2060	1633
Total	40	27843	16455

The average attendance is 311 more than that of 1925 which was 289 less than that of 1924.

During the year decorations and repairs have been carried out at the following schools:—

St. Stephen's C.E., St. Joseph's R.C. Girls', St. Cuthbert's C.E., Emmanuel C.E., St. Thomas' C.E., Lancaster Road; St. Thomas' C.E., Mill Fold; St. Augustine's R.C. Boys', St. Ignatius' R.C. Central, St. Ignatius' R.C. Boys', Moor Park Wesleyan, St. Mary's R.C., Roper's Boys, St. Mark's C.E. Mixed (part), Ashton Wesleyan Mixed, Ashton Wesleyan, Bray Street; St. Michael's C.E., Grimshaw Street C.E., St. Mary's Street Wesleyan, Orchard Mixed.

4.—MEDICAL INSPECTION.

The age groups examined during 1926 were, as formerly, three in number:—Entrants aged 5 and 6, of whom there were 2,865; Intermediate aged 7 and 8, numbering 2,780, and Leavers aged 12 and 13 who numbered 625.

A comparison of numbers examined in 1925 and previous years is shown as follows :—

	Year of Examination.					
	1926	1925	1924	1923	1922	1921
Entrants	2865	2157	1566	1509	1844	1502
Intermediate ...	2780	1404	1676	1951	2032	1945
Leavers	625	2070	1881	1809	1990	1798
Totals	6270	5631	5123	5269	5866	5245

5.—FINDINGS OF MEDICAL INSPECTION.

(a) UNCLEANLINESS.

The percentage of children found requiring attention on account of uncleanliness is less than during recent years. This is most satisfactory and reflects great credit on the work of the nurses and teachers, as well as on the mothers who have, in many cases, very few facilities for keeping the children clean.

During their visits to the schools to examine for uncleanliness, the nurses classified the children under five headings :—(1) those absolutely free from nits, (2) those with very few nits, (3) those with many nits, (4) those with severe nits, and (5) those who were verminous.

The following table gives the number in each group :—

(1) Free from nits	12,343
(2) Few nits	3,835
(3) Many nits	1,963
(4) Severe nits	390
(5) Verminous	34
Total number examined	18,565

Comparing last year with 1926, the results are :—

1925—No. examined, 19,537; No. requiring attention, 2,898=14.83%.
1926—No. examined, 18,565; No. requiring attention, 2,387=12.85%.

The number of home visits paid by the nurses on account of uncleanliness was 2,731, compared with 2,539 during the previous year.

No prosecutions have been undertaken by the Authority on account of verminous conditions among school children. The discovery by the School Nurse is followed by a note to the parents and by a personal visit. Where a rapid improvement is not evident, the work of cleansing is carried out by the School Nurses at the Clinic.

Seventeen children received this attention as compared with 16 in 1925.

(b) MINOR AILMENTS.

Very few minor ailments are noted during Routine School Inspection. These cases speedily find their way to one or other of the Medical Clinics where attention is given.

(c) TONSILS AND ADENOIDS.

The number of children referred for treatment on account of Enlarged Tonsils and Adenoids was 378, this number being 75 less than during 1925.

Number in	1926	1925	1924	1923	1922	1921	1920
	378	453	297	279	208	148	290

(d) TUBERCULOSIS.

Most of the cases suspected of Tuberculosis were, as formerly, observed at the Inspection Clinics, only one being sent to the Tuberculosis Dispensary following its discovery during routine inspection.

(e) SKIN DISEASE.

Owing to the number of children who attend the Treatment Centres for various forms of skin disease, the number referred for treatment by their own doctors is small, being only 26, as compared with 31 during 1925. Impetigo is the type of skin disease which is most often found requiring attention, but fortunately one rarely sees the severe forms which were comparatively common in former years.

(f) EXTERNAL EYE DISEASE.

Children suffering from external Eye Diseases usually have attention at the Clinics, but 17 cases were found during routine inspection and referred for treatment.

The numbers for the last few years are :—

1926	1925	1924	1923	1922
17	22	20	17	17

(g) VISION.

Of the 3,405 children who were examined for Defective Vision, 2,780 belonged to the intermediate group, the testing of which is always a matter of some uncertainty owing to the nervousness of these younger children and to the inability of some of them to read the tests. The total number of children (including special cases) referred for treatment was 627, as compared with 638 in 1925.

The numbers for the past four years are :—

1926	1925	1924	1923
627	638	651	581

The following gives the distribution of the numbers in the two groups :—

Age.		No. examined.	No. referred for treatment.	Percentage referred.
7-8 years.	Boys	1434	217	15.1
	Girls	1346	209	15.5
12-13 years.	Boys	322	32	9.9
	Girls	303	40	13.2

(h) EAR DISEASE AND HEARING.

Rather fewer children were found to be suffering from untreated ear disease and deafness, the number for the year being 31, that of 1925 being 56. The cases noted in school are much less severe than in former years, the Clinics having made great improvement in this disease.

Below are stated the figures for previous years :—

1926	1925	1924	1923	1922
31	56	56	41	46

(i) DENTAL DISEASE.

The number of children submitted for routine inspection was 4,224, as compared with 1,647 in 1925, and 1,593 casual children attended the Clinic, as compared with 1,134 in 1925. This increase of 3,034 was rendered possible by the addition to the Dental staff and the adoption of the complete scheme.

Each school was visited during the year and all children aged 6 and 7 inspected. Those requiring and accepting treatment have received the necessary attention.

Re-inspection of these children began in September and the first examination of " Entrants " who had reached the age of six years was undertaken for the first time. The next inspection, due to begin in September, 1927, will therefore include a new group aged six and the re-examination and treatment of groups aged seven, eight and nine. There is no evidence yet of a diminution of the number of casuals. This can hardly be expected until there is a larger proportion of children in the schools who have had the advantage of regular annual treatment.

(j) CRIPPLING DEFECTS.

At the 1921 Census the child population of Preston consisted of 9,640 children under five years of age and 21,479 between five and fifteen years of age. Among the former group there were discovered a few cripples (10) and the remainder (93) occurred among elementary school children who number at present approximately 16,500. These children were carefully sought out, enquiries being made from all sources, principally school teachers, attendance officers and medical practitioners. The children thus brought to our notice were examined by the Assistant School Medical Officers, their particular attention being devoted to the following points :—

1. The nature of the crippling condition.
2. The treatment considered necessary.
3. The nature of any appliances considered necessary.
4. The arrangements necessary to ensure education.

The findings of the Medical Officers are as follows :—

Age and Sex distribution of Crippled Children.

	Total	1912	1913	1914	1915	1916	1917	1918	1919	1920	1921	1922	1923	1924	1925	1926
Boys ...	55	8	6	7	4	3	5	7	2	5	4	1	1	1	...	1
Girls ...	48	3	6	3	7	3	5	11	4	4	...	...	2	...	...	...
Total ...	103	11	12	10	11	6	10	18	6	9	4	1	3	1	...	1

The treatment required is summarised in the following paragraphs :—

(a) Treatment.—Six of the children in the list require an orthopædic operation, four require operation for cleft palate, 18 require some form of electrical treatment or massage, 51 require periodical supervision and the remaining 24 appear to have reached a final and fixed stage.

(b) Splints and Instruments.—Twenty-three children require walking splints, nine require surgical boots, five spinal supports, one an artificial limb, four elaborate bed frames, and the remainder, 61, do not require any apparatus.

(c) Education.—Seventy-seven children can safely attend an ordinary public elementary school. Sixteen, of whom seven would require a conveyance, could attend the Open Air School. Two could attend the mental deficiency side of the Open Air School, two could attend a residential hospital school, one is not suitable for any school at present, two have left school, one has left the town and two are under school age.

A scheme for giving effect to these suggestions is now under consideration by the Council.

6.—INFECTIOUS DISEASE.

Under the system in operation in the Borough it is the duty of the Head Teacher to report the occurrence of and the suspected occurrence of infectious diseases among the scholars to the Medical Officer of Health. The cases are visited by the staff of the Medical Officer of Health and the results of these visits transmitted through the Director to the Head Teacher. Information as to the period of necessary exclusion and the actual cause of absence in suspected cases is also given. Daily information collected from the records of the Sanitary Inspectors, Health Visitors, Tuberculosis Nurses and School Nurses is prepared and collated with the information in possession of the School Attendance Officers. The following table shows how the different schools were affected.

There was very little epidemic disease prevailing. A fair number of cases of chicken pox were brought to light. The importance of this disease lies in the possibility of its being mistaken for small pox of the type prevalent in Durham and Derbyshire. An unusually large number of cases of mumps were investigated. The swelling of the neck sometimes seen in severe cases of diphtheria is frequently mistaken for mumps.

TABLE A.

Cases of Infectious Disease Reported by Head Teachers.

SCHOOL.	Scarlet Fever	Measles	Whooping Cough.	Diphtheria.	Chicken Pox.	Mumps.	Ringw'rm Eczema, Sore Eyes Heads, &c.	Influenza.
Parish Church	...	4	...	...	...	...	...	...
St. James'	...	...	...	...	...	...	...	...
St. Augustine's	...	...	3	1	15	33	4	...
St. Saviour's	...	...	...	...	4	39	...	...
Grimshaw Street	...	...	...	...	...	1	...	...
St. Stephen's	2	2	15	...	31	3	5	1
Christ Church	...	...	...	...	...	1	...	...
Hincksman Memorial	...	...	...	2	2	6	...	...
St. Mary's R.C.	...	...	...	...	9	2	1	...
St. Wilfrid's	...	1	2	...	9	1	...	...
St. Michael's	3	...	...	...	3	...	1	...
Sacred Heart	...	4	...	...	...	...	...	...
Ashton Wesleyan	...	1	...	...	2	5	...	...
St. Andrew's	...	7	2	1	4	12	7	1
Roebuck Street Council	...	1	22	...	64	5	15	...
St. Walburge's	...	2	3	...	...	2	...	...
St. Mark's	...	2	...	...	...	...	...	...
St. Peter's	...	1	14	...	9	1	...	...
Emmanuel	...	2	...	...	...	1	...	...
St. Cuthbert's	...	...	...	...	...	...	...	...
Eldon Street Council	...	2	...	...	...	...	...	...
Moor Park Wesleyan	...	...	...	...	...	...	...	...
English Martyrs' Elementary	1	...	3	...	16	...	...	...
St. Jude's	...	1	...	...	8	14	12	...
Deepdale Council	...	...	7	...	5	...	...	...
St. Paul's	...	1	...	...	...	2	...	...
St. Ignatius' Elementary	...	1	1	...	11	31	3	...
All Saints'	...	...	...	...	4	...	1	...
Holy Trinity	...	2	...	...	14	3	...	...
Orchard U.M.F.C.	...	...	...	...	2	...	...	...
St. Luke's	...	...	5	...	3	...	...	...
St. Joseph's	...	...	...	...	1	...	...	...
St. Matthew's	...	...	3	2	15	1	1	...
St. Matthew's Branch	...	...	2	...	12	12	...	...
Ribbleton Avenue	...	1	6	...	3	4	...	...
St. Mary's National	...	...	...	...	...	...	...	...
St. Mary's Street Wesleyan	1	...	...	...	7	3	...	...
St. Thomas's	...	...	2	...	...	10	...	...
Open Air School	...	1	1	...	4	3	...	...
St. Gregory's	...	...	...	...	...	6	...	...
	7	36	91	4	257	201	50	2
SECONDARY SCHOOLS.								
Park Secondary School	1	5	2	...	4	1	1	...
Catholic Convent	...	...	...	...	...	...	...	...
Catholic College	...	...	...	...	...	...	...	...
Preston Grammar School	...	...	...	...	...	...	...	...

7.—FOLLOWING UP.

Owing to the increased demands made upon the nursing staff, the work of following up those children found to have defects requiring treatment becomes more and more difficult as the activities of the School Medical Service increase in scope. Apart from the special home visits made at the request of the Medical Officers, the greater part of the visiting is done as a continuation of the routine school medical inspections.

Each time a school is inspected, the children on the corresponding nurse's visiting list are presented for re-examination. If their defects have been remedied, they are complimented before the other children, and the occason is used to impress the advantages of paying due attention to personal health and hygiene. If the defect is still untreated, the necessity for treatment is further explained to the child, the parent is again written to or visited by the School Nurse, and if necessary is invited to meet the School Medical Officer at one of the Clinics. Usually these measures suffice to ensure the carrying out of any treatment required. A visit from the local officer of the N.S.P.C.C. has a salutary effect in cases where there is obvious neglect of a child's health.

The number of cases referred to this officer during the year was 25, as compared with 17 in 1925.

8.—MEDICAL TREATMENT.

Although the essential element of school medical work is the prevention of ill-health, a certain amount of *treatment* is required to supplement this work, and to make the Service a practical and popular one.

Two new forms of treatment have been undertaken during the year, viz., the carrying out of refraction work at the School Clinic, and ionisation for otorrhœa.

Details of this work will be found in subsequent sections.

The following table shows some details of the work of the Inspection Clinic during the year :—

Particulars regarding attendances during 1926 :—

MILLER ARCADE INSPECTION CLINIC.

Defect.	On Books, 1st Jan. 1926.	New Cases.	Dis-charged.	Left on the Books 31st Dec., 1926.
Malnutrition	24	74	68	30
Uncleanliness—Head	2	5	6	1
,, Body	...	3	2	1
Skin Disease	12	200	204	8
Eye	13	276	284	5
Ear	13	192	193	12
Nose and Throat	13	190	187	16
Enlarged Glands	...	88	88	...
Defective Speech	...	2	2	...
Teeth	...	27	26	1
Heart and Circulation	20	28	40	8
Lungs	30	88	92	26
Tuberculosis—Pulmonary ...	6	23	14	15
,, Non-Pulmonary ...	7	18	16	9
Nervous System	9	24	23	10
Deformities	7	8	7	8
Other Defects	41	741	755	27
Total	197	1987	2007	177

BARLOW STREET INSPECTION CLINIC.

Defect.	On Books, 1st Jan. 1926.	New Cases.	Dis-charged.	Left on the Books 31st Dec., 1926.
Malnutrition	2	25	25	2
Uncleanliness—Head	...	4	4	...
,, Body	...	...	...	...
Skin Disease	5	104	104	5
Eye	10	191	199	2
Ear	9	87	89	7
Nose and Throat	4	89	86	7
Enlarged Glands	2	47	49	...
Defective Speech	...	...	...	...
Teeth	...	13	13	...
Heart and Circulation	6	26	24	8
Lungs	3	35	37	1
Tuberculosis—Pulmonary ...	1	2	2	1
,, Non-Pulmonary ...	...	4	2	2
Nervous System	1	12	9	4
Deformities	...	7	7	...
Other Defects	4	274	268	10
Total	47	920	918	49

Total attendances for the last five years :—

	Miller Arcade Clinic.	Barlow Street Clinic.	Total.
1926	4422	2280	6702
1925	...	...	6023
1924	...	...	4920
1923	...	...	4450
1922	...	...	3453

(a) MINOR AILMENTS.

There is no doubt that the School Clinic has come to stay. One reason of its success is that the children who attend for treatment are not strangers to the staff. They have mostly been seen at school and possibly visited at home, and when any minor treatment is required they come to the Clinic without any feelings of terror. Indeed, the tendency is rather for their fondness for the Clinic to exceed their desire for school work, and steps have to be taken to ensure that "coming to the Clinic" is not made a mere excuse for missing a few minutes at school.

The type of ailment dealt with, and the numbers treated will be found in the following tables :—

MINOR AILMENTS TREATMENT CENTRES, 1926.

(a) MILLER ARCADE.

Defect.	On Books, 1st Jan. 1926.	New Cases.	Dis-charged.	Left on the Books 31st Dec., 1926.
Skin :				
Ringworm, Scalp and Body	2	70	65	7
Scabies	...	4	4	...
Impetigo	13	403	394	22
Other Skin Diseases ...	2	33	32	3
Minor Eye Defects :				
External and other, but excluding cases falling in Table IV, Group I.	12	157	158	11
Minor Ear Defects	63	140	168	35
Miscellaneous (*e.g.*, Minor Injuries, Bruises, Sores, Chilblains, etc.)	61	1484	1473	72
Total	153	2291	2294	150

(b) BARLOW STREET.

Defect.	On Books, 1st Jan. 1926.	New Cases.	Dis-charged.	Left on the Books 31st Dec., 1926.
Skin :				
Ringworm, Scalp and Body	2	21	23	...
Scabies	...	...	...	...
Impetigo	...	59	59	...
Other Skin Diseases ...	1	11	12	...
Minor Eye Defects :				
External and other, but excluding cases falling in Table IV., Group I.	2	46	48	...
Minor Ear Defects	12	51	52	11
Miscellaneous (*e.g.*, Minor Injuries, Bruises, Sores, Chilblains, etc.)	18	572	572	18
Total	35	760	766	29

(c) OPEN AIR SCHOOL.

Defect.	On Books, 1st Jan. 1926.	New Cases.	Dis-charged.	Left on the Books 31st Dec., 1926.
Skin :				
Ringworm, Scalp and Body	...	4	3	1
Scabies	...	...	...	...
Impetigo	...	17	15	2
Other Skin Diseases	...	4	3	1
Minor Eye Defects :				
External and other, but excluding cases falling in Table IV., Group I.	...	15	13	2
Minor Ear Defects	...	13	5	8
Miscellaneous (*e.g.*, Minor Injuries, Bruises, Sores, Chilblains, etc.)	...	130	123	7
Total ...	...	183	162	21

ATTENDANCES.

	Miller Arcade	Barlow Street	Open Air School	Total.
1926 ...	27494	8431	5371	41296
1925 ...	...	...	...	33488
1924 ...	...	...	...	32233
1923 ...	...	...	...	31625
1922 ...	...	...	...	30964

NEW CASES.

	Miller Arcade	Barlow Street	Open Air School	Total.
1926 ...	2291	760	183	3234
1925 ...	...	...	...	2653
1924 ...	...	...	...	2632
1923 ...	...	...	...	2092
1922 ...	...	...	...	2175

Visits of Nurses to Children found Defective.

	1923	1924	1925	1926
Home visits	3649	3714	3265	3746
Home visits re cleanliness of head	2938	2972	2539	2731
Children inspected re cleanliness of head ...	22563	21308	19537	18565
School visits	363	315	112	97

The above table brings out quite clearly the outstanding need for additional staff. The amount of work occasioned by the increase of the number of Clinics has resulted in a very serious diminution of "cleanliness surveys" in the schools which will result in turn in a falling off of the improved standard of personal cleanliness which has been reached in the school children.

(b) TONSILS AND ADENOIDS.

The following table shows the number of children referred for treatment, and the numbers who received operative treatment for enlarged tonsils and adenoids under the Authority's scheme during the last five years :—

	1922	1923	1924	1925	1926
No. referred to Preston Royal Infirmary for treatment	204	321	303	395	504
No. operated upon at Preston Royal Infirmary ...	169	272	284	276	461

The considerable increase in the number of operations in 1926 is largely due to the augmented surgical staff at the Preston Royal Infirmary having been able to cope with the arrears of former years.

(c) TUBERCULOSIS.

The number of children referred to the Tuberculosis Officer for an opinion was 48. The number found by him to be suffering from active tuberculosis, including pulmonary, glandular, and osseous, was 17. These are now under his care. Some of them are having light treatment at the Preston Royal Infirmary, apparently with much benefit. Delicate children in whom no definite evidence of tuberculosis is found are usually drafted into the Authority's Open Air School.

(d) SKIN DISEASE.

Impetigo, ringworm and eczema constitute the bulk of the cases of skin disease met with at the School Clinics. The question of exclusion from school of children affected with ringworm merits special attention. The usual practice is to allow school attendance if the affected part is one which can be satisfactorily covered with a dressing and bandage. In some cases the disease has appeared to linger or spread in a school when such bandaged children have been attending—owing either to the presence of mild unnoticed cases in the school, or to the known cases not retaining their bandages in place. The average duration of treatment in 1926 was six weeks, so that if every case of ringworm were to be excluded from school the attendances would suffer appreciably. The best course appears to be to continue as at present, excluding a child from school only in special circumstances.

(e) EXTERNAL EYE DISEASE.

The number of these cases is practically the same as last year. The cases of blepharitis are often very intractable, especially in the poorer children, where the necessary supplementary treatment at home is not effectively carried out, owing partly to the lack of remedies, and partly to an exaggerated natural shrinking from the application of medicines to the eyes. Blepharitis is by far the commonest of the external eye affections met with, and is frequently improved by the wearing of suitable glasses.

(f) VISION.

A modification in our arrangements for the treatment of defects of vision has been introduced since the last report was made. Whereas the work was formerly carried out at the Preston Royal Infirmary by their ophthalmic surgeons, it is now carried out at one of the School Clinics during three sessions per week. Two sessions are conducted by one of the assistant School Medical Officers and one session by an ophthalmic surgeon who is on the staff of the Preston Royal Infirmary.

Contact with the Infirmary is thus still maintained as regards eye affections, and at the same time the work of following up those children for whom glasses are prescribed is very much facilitated, owing to the children being under the direct supervision of the School Medical Staff.

The work of the Refraction Clinic, since its inception on 1st July, 1926, is summarised in the following table :—

REFRACTION CLINIC, 1st July to 31st December, 1926.

A.—ATTENDANCES BY APPOINTMENT.	
No. of sessions	60
No. of appointments made	521
No. of appointments kept	479
Percentage of appointments kept	92%
No. of refraction carried out by appointment ...	458
No. of prescriptions for glasses	331
Percentage of children examined requiring glasses ...	72%
B.—CASUAL ATTENDANCES.	
No. of casual attendances	293
(a) Submitted to refraction	57
(b) Glasses prescribed	37
(c) Glasses for verification	224
(d) Other cases	17
C.—AVERAGE ATTENDANCES PER SESSION.	
(a) New cases for refraction	8
(b) Casual attendances	5

During the whole year 975 children were submitted to refraction under the Authority's arrangement, 36 were examined by Private Practitioners and 37 by Opticians, making a total of 1,048. The corresponding figure for 1925 being 746, 50, 39 and 835.

Seven hundred and ninety-five children were given prescriptions for spectacles and 615 obtained them. The Education Committee provided glasses in 28 instances. These figures again shew an increase over the corresponding figures (716, 477 and 10) in the year 1925.

(g) EAR DISEASE AND HEARING.

Ionisation as a method of treatment for otorrhœa was begun in January, 1926, under the supervision of one of the Assistant School Medical Officers, and so far has been limited to the Clinic of which this officer is in charge. The total number of cases attending this Clinic in 1926 was 66, and the number found suitable for and submitted to ionisation was 24. Since the object of ionisation is to sterilise the middle ear, from which the discharge proceeds, it is evident that the cases for ionisation have to be selected with reference to their suitability for achieving this end. It is found necessary first to bring the ear into a reasonably clean condition by douching, and this part of the treatment sometimes occupies several months. In suitable cases, where access to the middle ear is then free, ionisation puts the finishing touch on the treatment, with the result that the now cleaned and sterilised ear ceases to discharge. The method is a valuable means of completing the treatment of a case of otorrhœa, but can only be looked upon as an adjunct to the ordinary treatment.

Moreover, since in most cases the children continue to have a perforated ear drum, there is no guarantee that re-infection of the middle ear will not occur from without; so that it need not be a matter for disappointment that some of the ionised cases return after an interval with otorrhœa again. Generally speaking, it was found much more easy to arrest the discharge in the relapsed cases than in the primary cases. The two or three cases of relapse have occurred since the beginning of 1927.

Details of the 24 cases ionised are given in the following table :—

No. of cases ionised in 1926	24
No. discharged as cured	19
Average interval between ionising and final discharge	6 weeks.
No. of relapses	0
No. still under treatment on 31st December, 1926 ...	4
No. left town	1

The interval between ionising and final discharge appears rather long, but the children were kept under observation until the ear was perfectly dry. In some cases boracic powder was applied to the ear to hasten the process of healing, and in one or two further douching had to be done.

On the whole it is satisfactory to be able to record 19 cures out of the 24 cases ionised.

(h) DENTAL DEFECTS.

A reference to the following table and to table IV. at the end of the report will show that of the 1,994 children in the routine groups found to require treatment, 1,241 were actually treated, giving a percentage of 66 per cent.

The figures in the previous five years have been 62.7, 62.8, 64.5, 69 and 64.3.

The actual number treated is very much more than double that of any previous year, but the number escaping treatment classified as either "refused treatment" or "own dentist" remains pretty much as before. The "own dentist" group has practically no significance. It is very rare for children in Elementary Schools to obtain any conservative treatment whatever on their own initiative.

Ignorance of the value of the care or conservation of the teeth is still a prominent feature and refusals to allow treatment are difficult to overcome. We find the influence of the head teachers of the greatest value in this connection.

It is confidently anticipated that "following up" these "refusals" and "own dentists" in their homes by a School Nurse, which will be feasible in the forthcoming increase in the School Nursing Staff, will effect a great improvement.

ANNUAL REPORT OF THE DENTAL SURGEONS

For the Period January 1st to December 31st, 1926.

SCHOOLS VISITED	Number of Children Examined at School	No Treatm't Required	Number requiring Treat-ment.	Number accepted Treat-ment.	Number refused Treat-ment.	Own Dentist.	Particulars of Attendances and Work at Dental Clinic.					
							Number attended Clinic	No. of Actual Attend-ances at Clinic	No. of Teeth Extracted	No. of Stoppings	No. of Dressings	No. of Scalings
St. Matthew's Branch	...	...	...	...	...	...	8	32	...	55	24	...
St. Luke's		...	...	...	...	...	...	6	...	13	1	...
Ashton Wesleyan	...	...	...	...	...	...	...	7	...	9	9	...
St. Mary's C. E....	...	...	...	...	...	...	...	2	...	4	...	...
St. Matthew's	4	2	2	2	...	...	6	30	...	37	6	...
St. Joseph's	187	116	71	51	11	9	53	186	2	300	104	...
St. Saviour's	64	29	35	18	16	1	19	47	...	84	34	...
St. Augustine's	144	63	81	63	11	7	60	205	6	335	137	...
Ribbleton Avenue Wesleyan	76	44	32	17	8	7	23	66	2	102	34	...
Parish Church	85	49	36	25	6	5	19	61	...	92	47	...
Grimshaw Street	79	30	49	30	5	14	27	87	4	140	61	...
St. Ignatius	214	128	86	70	10	6	54	193	7	277	122	...
St. Paul's...	60	30	30	22	4	4	16	47	...	67	39	...
Orchard	32	21	11	8	...	3	6	20	...	27	16	...
St. Thomas'	87	61	26	18	7	1	19	68	2	95	52	...
English Martyr's	205	124	81	64	3	14	49	132	46	247	129	...
All Saints'	66	35	31	25	...	6	25	75	...	108	47	...
Holy Trinity	21	12	9	7	2	...	6	26	...	45	18	...
St. Wilfrid's	31	13	18	14	2	2	12	48	...	71	31	...
St. Mary's R.C.	79	39	40	20	11	9	19	83	...	114	53	...
Moor Park Wesleyan	121	80	41	26	3	12	26	79	1	91	51	...
St. Peter's	74	38	36	26	5	5	22	75	...	100	47	...
Ropers	17	5	12	10	2	...	10	27	...	18	2	...
Emmanuel	155	102	53	33	9	11	37	117	3	156	79	...
Talbot	151	67	84	61	8	15	53	213	1	317	162	...
Christ Church	105	37	58	47	6	5	55	182	...	258	92	...
Roebuck	76	45	31	18	3	10	15	78	...	82	67	...
St. Stephen's	61	36	25	11	10	4	10	35	...	51	31	...

Eldon Street Council	64	36	28	22	2	4	19	94	...	130	71	...
St. Gregory's	40	27	17	9	2	6	6	22	5	38	15	...
St. Jude's	79	44	35	21	8	6	23	89	...	138	65	...
Hincksman	67	17	50	45	5	...	47	166	5	240	88	...
St. Cuthbert's	35	16	19	11	...	8	12	40	1	53	34	...
Deepdale Council	213	114	99	60	10	29	57	232	...	342	146	1
St. Mark's	81	23	58	43	10	5	48	178	2	253	124	...
St. Mary's C.E.	100	54	46	39	7	...	23	47	...	55	45	...
St. Andrew's	135	70	65	38	13	14	35	129	3	204	90	...
St. Matthew's	166	91	75	60	3	12	53	207	...	321	126	...
Ashton Wesleyan	64	30	34	19	5	10	21	66	...	101	40	...
St. Matthew's Branch	41	23	18	11	5	2	14	44	1	66	21	...
St. Michael's	32	18	14	10	4	...	11	31	...	52	14	...
Sacred Heart	69	36	33	16	10	7	16	47	...	69	25	...
Ribbleton Avenue	120	72	48	32	2	14	26	82	...	98	46	...
St. Luke's	108	63	45	29	10	6	28	98	...	131	58	...
St. Mary's Street Wesleyan ...	85	56	29	13	11	5	9	20	...	31	16	...
St. Joseph's	296	179	117	91	12	14	...	...	...	...	...	...
Open Air (inspected in 1925) ...	...	...	...	...	...	...	5	74	4	110	30	...
Open Air, Physical Defectives ...	163	34	129	129	...	...	90	331	4	534	77	1
Open Air, M. D. Special ...	72	15	57	57	...	...	49	197	...	333	70	2
Routine Group Totals ...	4224	2230	1994	1441	261	292	1241	4421	99	6594	2696	4
Casuals Examined at Dental Clinic	1593	...	1593	1593	...	...	1593	1859	1878	1141	81	5
Total 1926	5817	2230	3587	3034	261	292	2834	6280	1977	7735	2777	9
TOTALS ... 1925	2781	715	2066	1779	53	234	1718	4078	1006	4939	1537	44
do. ... 1924	2534	637	1897	1649	87	161	1578	3554	1021	3898	1110	35
do. ... 1923	2511	627	1884	1669	54	161	1551	3504	950	3738	1374	59
do. ... 1922	2539	719	1820	1578	86	156	1539	3595	926	3786	1570	35
do. ... 1921	2918	1047	1871	1570	42	259	1493	3760	731	3783	1909	15
do. ... 1920	2597	1066	1531	1365	31	112	1334	3515	433	3047	3159	8
do. ... 1919	1939	870	1069	986	26	34	1052	2442	497	1976	2238	4
do. ... 1918	2657	171	1486	1278	102	54	1287	1976	437	2035	1650	12
do. ... 1917	2354	353	1470	1268	103	72	1116	2044	683	1301	1762	43

The extraction of permanent teeth by means of gas anæsthesia has been of great advantage to both patient and operators. It eliminates pain and anticipation in the former and saves much time to the latter. Local anæsthesia by injection requires a certain time to act—about five minutes—and is therefore unsuitable for general clinic use.

The question of the provision, by sale, of cheap toothbrushes at the schools or clinics was mentioned in last year's report. The adoption of some such system would have a definite hygienic value.

(i) SPEECH DEFECTS.

No special provision has yet been made for the treatment of speech defects but there are very few children in the area who would benefit by such special treatment. It is noticed that spontaneous improvement occurs in many cases assisted by the painstaking efforts of the teachers in the elementary schools.

9.—OPEN AIR EDUCATION.

(a) PLAYGROUND CLASSES.

There are no playground classes in this area.

(b) OPEN AIR SCHOOL.

A comparatively full account of the Open Air School was given in the annual report for 1925; but in the present report the subject is dealt with at even greater length, in an attempt to answer the question " Can it be shewn that an Open Air School does any definite good?" This is a question which one would like to see answered in no uncertain manner, for all who are concerned with the administration of Open Air Schools have the feeling that the schools certainly do benefit the children who attend them, but at the same time it is realised that there is no clear evidence of this improvement in the ordinary school statistics. The children are weighed regularly, bathed, fed, medically inspected, and visited at home when necessary : but the records of all these activities give no clue to the specific part the Open Air School may have played in bringing about any improvement noted.

To put the matter on an experimental basis, it would be necessary to carry out identical series of observations, over a period of a year, on the children of Open Air Schools and those of Public Elementary Schools of similar size. Such an investigation would yield results of considerable value, but the difficulties of carrying it out are such as to render its performance improbable in many districts. As the next best thing, our Open Air School statistics for 1926 have been analysed from a great many points of view to try and discover as many inter-relations as possible, and they are presented in this report with inferences and deductions which seem reasonable, but which may have to be modified in the light of further experience and comparison with the figures of other authorities.

As the importance of the tables is not immediately evident, a brief summary of the main features will perhaps be of assistance :—

(1) The number of children who attended the Open Air School during 1926 was 249 (= 126 on the books on 1st January, 1926, and 123 admitted or re-admitted during the year). The period of attendance varied from a few days to the whole year (early January—late December = 11½ months). In most cases the children were weighed soon after admission and shortly before discharge, (as well as at fortnightly intervals), but in 27 cases it has been impossible to trace one or both

of these weighings, with the result that the number of children for whom complete records are available is 222. The average observed period of attendance for these 222 children amounts to 6¾ months.

(2) During the year the great majority of children gained in weight, but even including those who lost and those who remained stationary in weight, the average observed gain was 4 lbs. 9 ozs. Since this increase took place in 6¾ months, the average monthly gain was 11 ozs. : a normal rate of growth for healthy children aged 7—14 is represented by an increase of 8½ ozs. per month.

(3) By dividing the entrants and leavers into corresponding age groups and finding the average weight of each group and the average of all the groups, it is discovered that the children of a given age discharged from the school in 1926 were 1 lb. 12 ozs. heavier than children admitted of the same age.

(4) The average length of stay of the children discharged in 1926 was 1 year 1 month.

(5) Sixty-six children were discharged in 1926 as "fit"—either to return to their former school, or to leave school altogether. The term "fit" is merely relative, but since none of the children *admitted* can be so described, it follows that the "fitness" must have developed after admission to the school, and therefore in all probability as a result of attending the school.

An effort was made to obtain the after histories of all the children discharged as "fit" in 1925, with the following results :—

TABLE A.

After-history of children discharged from the Open Air School in 1925 as "fit."

In good health ...	52%	At work	42%
In fair health ...	32%	Awaiting work	2%
In poor health ...	6%	At Public Elementary Schools ...	36%
Dead	4%	Returned to Open Air School ...	6%
Not traced ...	6%	Unfit for work	4%
		Dead	4%
		Not traced	6%
Total ...	100%	Total	100%

It is satisfactory to find that so few are in poor health or unfit for their duties 1¼ to 2¼ years after discharge.

One very real difficulty in interpreting the weight records of the school is the absence of a recognised standard which could be considered the normal for children of the district.

Numerous "weight and age" tables have been published, but in considering the results obtained at the Open Air School it is essential to make comparisons not with the normal children of the whole country, but with the normal inhabitants of the district. Fortunately the special anthropometric survey which was carried out in 1926 at the request of the Board of Education supplies some valuable information on this point.

As the survey was chiefly limited to children of 5, 8 and 12 years old, only the figures for the latter two age groups are available for comparison with the Open Air School figures.

The following table shows a comparison between Open Air School children and others :—

TABLE B.

Average Weights.

Age.	Open-Air School Entrants, 1925 and 1926	Normal Preston Children.	Open-Air School Leavers, 1925 and 1926.
8— 9 years	47.5 lbs.	52.0 lbs.	51.0 lbs.
12—13 ,,	68.3 lbs.	71.5 lbs.	69.0 lbs.

It will be noted that the children are still below the normal weight when discharged, but this is partly because many of those who leave the school do so for other reasons than their fitness for discharge. The table is based on a comparatively small series of figures as regards columns 2 and 4, so that too much importance need not be attached to the actual variations from the normal.

A comparison of the weights of children discharged as "fit" and all children discharged is shown in the following table :—

TABLE C.

Comparison of "fit" discharges with all discharges 1925 and 1926.

	Fit.	All.
Average age of children discharged ...	12 yrs. 4 mos.	12 yrs. 0 mos.
Average weight of children discharged	5 st. 1 lb. 0 ozs.	4 st. 11 lbs. 8 ozs.
Average weight for age	5 st. 0 lb. 8 ozs.	4 st. 13 lbs. 0 ozs.
Difference from normal	+ ½ lb.	— 1½ lbs.

It is seen from this table that those discharged as "fit" are somewhat above the so-called normal weight; while the average child discharged is definitely below this normal. The "fit" child is 2 lbs. better off than the general type of leaver. It may seem that undue prominence is being given to the weight records; but it is considered that of all the measurements which might be made of children at school, the observation of the weight gives the most useful indication of the child's response to its physical environment and of its general level of health.

The principal peculiarities of the Open Air School, apart from the educational side, are three in number—the provision of good food, the utilisation of fresh air, and the daily medical supervision of the children.

It would be interesting to study the separate effects of these factors with a view to revising our organisation in accordance with any indications which might result from such a study. This has not been done directly, but in an indirect manner the statistics provide some information as regards the feeding of the children. I refer to the comparison of the Mentally Defective School statistics with the Open Air School statistics. The relation of the two schools has been explained in previous reports, and it will be sufficient here to point out that in the one case we are dealing with children who are not necessarily physically defective (although many of them are), and who do not have their meals in school, except for a small percentage of cases : whereas in the other case the children, without exception, have breakfast, dinner and a light afternoon meal at school daily. Both are taught on open air lines and both have the same medical attention. The principal difference is in the feeding of the children, although a point of some importance is the fact that the Mentally Defective School children do not come and go at such short intervals as the Open Air School children do, but stay at the school for several years in most cases. Table D shows the different rates of growth in the two cases.

TABLE D.

Comparison of Open Air School and Special Mentally Defective School.

	Open-Air School.	Special School.
Average period of observation in 1926	6¾ months	9 months
Average gain in weight per month	11 ozs.	10 ozs.

It is evident that the children who are fed at school grow more rapidly than those who are not. Possibly this is because the physically defectives have more leeway to make up; but there is evidence of the benefit of the feeding in the fact that 13 mentally defective children who habitually had dinner at school in 1926 gained an average of 10½ ozs. per month instead of the general average of 10 ozs. There is no doubt that the Open Air School children do improve rapidly in the first few months after admission, and it is a matter of satisfaction that in general this improvement continues, though at a slower rate, for one or even two years. The following table shows the average gain in weight in different periods :

TABLE E.

Relation between length of stay at Open Air School and gain in weight per month.

Length of Stay.	Average gain in weight during stay.	Average gain per per month.
4 Months	60 ozs.	15 ozs.
8 ,,	89 ozs.	11 ozs.
12 ,,	108 ozs.	9 ozs.
24 ,,	216 ozs.	9 ozs.

The figures seem to indicate that within 12 months at the school the children reach a level of health which, while not showing a tendency to improve on further attendance, is capable of being steadily maintained for a second year. Calculating from the actual lengths of stay of all the children discharged in 1926, the average stay at the school amounted to 13 months. The discharges were, of course, arranged independently of any theoretical considerations, and it is interesting to note the close relationship between the actual period of attendance and the calculated optimum.

In 1926, 44 per cent. of the children discharged were over 13 years of age. Hitherto it has been the custom when a child is within six months or so of school leaving age, to ignore his or her possible fitness for discharge from the Open Air School and allow him or her the supposed benefit of the extra few months at the Open Air School, rather than send the child back to an ordinary school for the finishing-off period. But a recent experience has thrown some doubt on the wisdom of this practice, in view of a difficulty which has arisen in the matter of obtaining a post when the child has told his prospective employer that he attends the Open Air School. Naturally, when a child who is about to leave school seeks employment, one of the first questions asked is " What school do you go to?" and if the answer is the Open Air School, the inference is liable to be drawn that the child is " one of the delicate ones "—as one employer put it. Theoretically the fact of a child attending the Open Air School certifies it as physically unfit. But such a child attends the school in the hope of becoming fit—a change which does not take place suddenly after a stay of so many months.

For a time before their discharge, many of the children are thoroughly " fit," and in the case of children approaching school leaving age it would appear to be an advantage to have them discharged as soon as they are fit, rather than to allow them to remain at the Open Air School in the expectation of a consolidation of their physical improvement occurring during their last few months at school. The matter has another aspect, of course—that of the employer and the community in general; but as the difficulty is largely one of prejudice rather than actual material moment, the advantage to the child outweighs the apparent disadvantage to others.

It has been shewn in table C that the average child discharged from the Open Air School in 1925 and 1926 was 1½ lbs. below the weight which has recently been found to be the normal for Preston elementary school children. (It may be mentioned in passing that this normal is considerably below the usually accepted standard, but this fact does not impair the usefulness of the figures for the present purpose). Table F shows the comparative figures for all admissions and discharges in 1925 and 1926. It is seen that on admission, the average child is 4½ lbs. below its proper weight; so that whilst it is still 1½ lbs. below weight on discharge, it has improved to the extent of 3 lbs. by its stay at the Open Air School. (It may not appear that the figures in the two columns refer to the *same* children, but it so happens that the average stay of those children discharged in 1925 and 1926 corresponds very nearly to the difference in age of the admissions and discharges, so that for the present purpose the figures may be taken as being the admission and discharge weights of the same group of children).

TABLE F.

Weights of children admitted and discharged in 1925 and 1926 (Boys and Girls).

	Admissions.	Discharges.
Average age	10 yrs. 8 mos.	12 yrs. 0 mos.
Average weight	4 st. 2 lb. 10 ozs.	4 st. 11 lb. 8 ozs.
Average weight for age	4 st. 7 lb. 2 ozs.	4 st. 13 lb. 0 ozs.
Average deficiency in weight ...	4½ lbs.	1½ lbs.

Another method of stating the information contained in this table is that in the 16 months represented by the difference in age of the admissions and discharges, the children attending the Open Air School gained 8 lbs. 14 ozs. in weight instead of the 5 lbs. 14 ozs. which appears to be the normal for elementary school children of the district. The explanation of the difference is, as already stated, the deficiency in weight which the average child shows on admission to the Open Air School. A study of table G reveals the causes of this deficiency, and shows that indefinite general ill-health accounts for a larger number of admissions than any well-defined disease (31 cases). Next in numerical order come pre-tubercular states (29 cases), anæmia (19 cases) and bronchitis (16 cases). These four categories account for 77 per cent. of all the admissions in 1926, the remainder consisting of a few cases of the various disorders tabulated.

TABLE G.

Analysis of Admissions, 1926.

Disability.	Boys.	Girls.	Total.
Anæmia	6	13	19
Bronchitis	12	4	16
Cardiac Disease	4	5	9
Chorea	3	3	6
Debility	14	17	31
Diarrhœa, Chronic	2	...	2
Dyspepsia	2	...	2
Headache and Vertigo	2	...	2
Lupus	1	...	1
Pre-tubercular	10	19	29
Recurring Boils	...	...	...
Recurring Colds	...	...	...
T.B. Abdomen	...	1	1
T.B. Arm	1	...	1
T.B. Glands	...	3	3
T.B. Hip	...	...	...
T.B. Spine	...	1	1
Total	57	66	123

As regards the response to the environment of the Open Air School, this depends very largely upon whether a child's disability is one in which improvement rests with the child's natural resistance, or whether any other factor is at work. Organic heart disease, for example, is not cured by sending a child to an Open Air School, but the general low state of health which often accompanies this disorder *is* capable of improvement by attendance at an Open Air School. Similarly anæmia requires definite medical treatment which we are not in a position to give at the Open Air School, so that all we can expect in these cases is some general improvement in physique. The same might be said of many other conditions, and in judging of the value of an Open Air School, therefore, the limitations of its functions must be borne in mind. Of course such cases as require specific treatment are recommended to consult their own doctor or the local Infirmary, and reasonable persuasion is used to have the necessary treatment carried out. But too often this is done in an unsatisfactory or intermittent manner owing to financial or domestic difficulties—e.g., someone is poorly in the house and the mother cannot take the child to the doctor or the Infirmary for treatment, with a resulting tendency for treatment to lapse altogether. Apart from the treatment of minor maladies, the role of the Open Air School on the medical side is to improve our children's natural resistance—to give them a better chance, in other words, to combat disease. The home environment of a child frequently increases the difficulty of our task, but the practice of keeping the childern in school from the time they arrive in the morning until the close of school in the afternoon is perhaps an important factor in counteracting this adverse influence.

The school dietary for 1926 was as follows :—

Breakfast, 9 a.m.—

1. Bread and Milk or Porridge and Milk.
2. Baked Apples, or Stewed Prunes, or Bread and Butter, or Bread and Jam.
3. Cocoa and Milk.

Dinner, 12-15 p.m.—

1. Shepherd's Pie (beef, potatoes, onions), or Irish Stew and Bread, or Meat Pies, Potatoes and Vegetables, or Meat Soup, Potatoes and Bread, or Butter Pie.
2. Custard and Fruit, or Roly Poly Pudding, or Stewed Fruit, or Rice Pudding.

Afternoon Meal, 3 p.m.—

1. Milk.
2. Cakes, or Bread and Jam.

The eating of fat is being encouraged, and the children appear to be responding very well. Certain increases have taken place in the daily food ration since 1925, notably as regards meat, sugar, and boiled puddings. Bread and butter, or bread and jam is always available at dinnertime for any child who prefers it to the sweet provided.

The cloakroom arrangements at the school are of a somewhat special nature. After the children have hung up their garments and gone to their classrooms, the clothes are examined by an attendant, and those specially in need of drying are hung on rails in a small room heated by gas fires. A number of waterproof coats are provided at the school for the use of children who need them on wet days. The necessary particulars are recorded by the Head Teacher when the coats are given out, and the children are required to return the coats on the next school day. This privilege is highly appreciated, and is one which has not been abused.

Some of the children keep a pair of slippers and a change of stockings at the school in a room kept for the purpose, so that if they should get their feet wet on the way to school they can change on arrival and put their wet footwear to dry before a gas fire in a special room. Additional slippers and stockings are provided for necessitous children who cannot provide their own. A few pairs of clogs are kept for the use of children who would otherwise be likely to suffer from the effects of having their feet wet on the way home from school.

In preparing this report, a mass of detailed information was elaborated which does not appear to admit of logical analysis at present to any further degree than the inferences already presented. Figures for both 1925 and 1926 were worked out in order to discover what reliance could be placed on deductions drawn from a single year's figures. Arguing only from the 1925 figures, it might be shown that boys profit more than girls by the Open Air School; but the 1926 figures do not support this conclusion. This and other matters which it would be interesting to elucidate, must therefore remain unsettled for the present. The tables now published are only a portion of the statistical information on which this report is based : considerations of space prevent me including other figures.

The principal features in the tables for both years are summarised in table H and it is interesting to note the close agreement between them.

TABLE H.

Comparison of 1925 and 1926 figures.

	1925	1926
Average observed gain in weight of all children ...	5 lbs. 0 ozs.	4 lbs. 9 ozs.
Average period of observation	7 mos.	6¾ mos.
Average observed gain per month	11½ ozs.	11 ozs.
Average excess in weight of leavers over entrants of same age	1 lb. 8 ozs.	1 lb. 12 ozs.
Average length of stay of all leavers	17½ mos.	13 mos.
Average length of stay of fit leavers	16½ mos.	17 mos.
Percentage of fit leavers	55	60

Perhaps the two most representative statistical indications of the usefulness of the Open Air School are : (1) that 55—60 per cent. of the children discharged in 1925 and 1926 were considered fit, i.e., no longer suitable for retention at the school on grounds of ill-health ; and (2) that the average weight of *all* the children discharged in 1925 and 1926 was 1½—1¾ lbs. greater than the average weight of children admitted *of the same age*.

Evidently the children do tend to improve whilst attending the Open Air School, but the natural tendency for spontaneous recovery which is so marked in children makes it difficult to assess the value of any particular remedy or line of treatment. For example, the figures in this report appear to show that whereas the type of child who ultimately finds its way to the Open Air School is 4½ lbs. under weight at 11 years of age, it is only 3 lbs. under weight at 12 years 4 months even though it attend an ordinary elementary school in the meantime. If such a child attend the Open Air School it is only 1½ lbs. under weight at 12 years 4 months.

It is to be remembered that the statistics of the Open Air School are rendered less favourable by the presence in the school of what might be called " permanent invalids "—children with heart disease, untreated anæmia, etc.

Moreover, as might be expected from the known association between sickness and poverty, many of the Open Air School children come from the most squalid homes in the town. Their ideas of cleanliness and personal hygiene have had no chance to develop. What they need is not only the teaching of principles, but the application of the means of keeping clean and warm and tidy, and a proper supply of wholesome food. These are wants which the Open Air School definitely supplies, and in so doing it renders a service which statistics leave unnoticed. The children also learn to appreciate the benefits of fresh air and pleasant surroundings, and leave the school, we believe, with higher ideals than they brought to it. It is probable also that something of the value of self-reliance and mutual interdependence finds its way into their minds, and they can scarcely fail to learn the value of health and the necessity for guarding it as carefully as possible.

The answer to the question formulated at the outset is not so definite as one would like, but the reasons for this have been mentioned. It may be, indeed, that the Open Air School is not the *fons et origo* we perhaps thought it was—possibly our expectations were unreasonable. At any rate the school has its sphere of usefulness even in its present state, and we believe that when more is known of the requirements of ailing children, the Open Air School will be one of the greatest assets we possess for supplying their needs.

OPEN AIR SCHOOL. ADDITIONAL STATISTICS, 1925 and 1926.

TABLE I.

School Population.

	1925			1926		
	Boys	Girls	Total	Boys	Girls	Total
No. on books on 1st January	35	45	80	56	70	126
,, ,, 31st December ...	56	70	126	67	73	140
No. admitted during the year ...	62	77	139	57	66	123
No. discharged ,, ,, ...	41	52	93	46	63	109
No. on books continuously from 1st Jan. to 31st Dec.	15	15	30	22	30	52
Average No. on roll	61	72	133	63	84	147
Average attendance	52	60	112	52	68	120

TABLE J.

Analysis of Admissions according to age and disability.

DISABILITY.	1925								1926							
Age on admission ...	7	8	9	10	11	12	13	All Ages	7	8	9	10	11	12	13	All Ages
Anæmia	1	2	3	4	3	3	2	18	1	1	3	2	5	3	4	19
Bronchitis	4	2	3	2	2	5	3	21	4	2	3	4	1	1	1	16
Cardiac Disease	...	1	2	1	1	1	2	8	1	1	1	3	1	...	2	9
Chorea	1	1	...	1	...	1	...	4	1	...	...	1	1	2	1	6
Debility	9	2	4	5	9	4	3	36	5	4	6	2	6	4	4	31
Diarrhœa, Chronic ...	...	...	...	...	1	...	...	1	1	...	...	...	...	...	1	2
Dyspepsia	...	...	...	...	...	1	1	2	...	1	...	...	...	...	1	2
Headache and Vertigo ...	...	1	...	...	...	2	2	5	...	...	...	...	1	...	1	2
Lupus	1	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Pre-tubercular	1	1	6	5	4	8	3	28	3	3	7	3	4	4	5	29
Recurring Boils	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...
Recurring Colds	...	...	1	...	2	...	...	3	...	...	...	...	...	...	...	...
T.B. Abdomen	1	...	...	...	...	...	...	1	...	...	...		...	1	...	1
T.B. Arms	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
T.B. Glands	...	...	...	1	2	3	2	8	1	...	...	1	1	...	...	3
T.B. Hip	...	...	...	...	1	...	...	1	...	...	...	...	...	...	...	...
T.B. Spine	...	...	...	...	1	...	...	1	...	1	...	...	...	...	...	1
Total	18	10	19	19	27	28	18	139	17	13	21	16	20	16	20	123

TABLE K.

Ages on Admission and Discharge in 1926.

Age.	Admissions.			Discharges.		
	Boys	Girls	Total	Boys	Girls	Total
7— 8	10	7	17	...	1	1
8— 9	6	7	13	5	4	9
9—10	15	6	21	4	5	9
10—11	10	6	16	9	2	11
11—12	7	13	20	4	10	14
12—13	3	13	16	10	7	17
13—14	6	14	20	7	26	33
14 and over	...	...	...	7	8	15
Total ...	57	66	123	46	63	109

TABLE L.

Analysis of Discharges.

Reasons for Discharge.	1925			1926		
	Boys	Girls	Total	Boys	Girls	Total
Fit to attend former school	13	18	31	23	25	48
Unfit to attend any school	6	12	18	12	16	28
Over school age : (*a*) fit	8	12	20	7	11	18
(*b*) under T.O. ...	2	...	2	...	2	2
Transferred to Special M.D. School...	8	4	12	1	1	2
Found unsuitable for Open-Air School	...	...	...	1	3	4
In temporary vacancy	1	1	2	...	...	...
Irregular attendance	...	...	...	...	1	1
Removed by parent	...	3	3	1	4	5
Admitted to orphanage	...	...	...	1	...	1
Left the district	2	1	3	...	...	...
Died	1	1	2	...	...	...
All causes	41	52	93	46	63	109

TABLE M.

Average variations in weight during calendar year.

	1925	1926
Number of children observed	190	222
Percentage who gained in weight	97½	92
,, ,, lost in weight	2	6
,, ,, remained stationary	½	2
Average gain for all	5 lb. 0 ozs.	4 lb. 9 ozs.
,, ,, those who gained	5 lb. 3 ozs.	5 lb. 1 oz.
Average loss for those who lost	0 lb. 4 ozs.	1 lb. 1 oz.

All observations of weight referred to in the foregoing tables were made with the children divested of their boots and outer clothing.

TABLE N.

School Baths and Clinic Attendances.

Number of baths given in 1926 (including Special M. D. School) ...	6,699
Number of children attending Medical Inspection Clinic	857
Average daily attendance at Minor Ailments Treatment Clinic ...	22
Total attendances at Minor Ailments Treatment Clinic	4,632

In addition to these attendances made by Open Air School children there were 739 attendances made by children attending St. Gregory's and Deepdale Council Schools.

10.—PHYSICAL TRAINING.

The physical training in the Elementary Schools has, for several years, been undertaken by the teachers, no specially trained instructor having been appointed.

11.—PROVISION OF MEALS.

As in 1925, there were three Centres engaged in providing free meals for the poorer children. Only mid-day meals were supplied, the number of these for the year being 56,226, as compared with 52,645 in the previous year and 71,585 in 1924. The number of children who attended was 431, as against 412 last year.

The particulars as regards the distribution of numbers in the three Centres are seen in the following table :—

Centre.	Number of Meals supplied.	Number of Children.
Marsh Lane	15,375	125
Glover's Court	34,253	251
Roebuck Street	6,598	55
Total	56,226	431

12.—SCHOOL BATHS.

Judging by the increased number of attendances, it is evident that swimming is certainly becoming more popular amongst the children. As there are few finer exercises, one is glad to see so many taking advantage of the opportunities afforded. Last year there were 7,327 attendances made by boys and 5,723 by girls. This year the attendances by boys were 10,002 and those by girls 6,535.

The number attending each of the swimming baths are as follows :—

Baths.	Boys.	Girls.
Saul Street	6,437	... 4,342
Moor Park	1,492	... 1,511
Waverley Park	1,552	... ...
Haslam Park	521	... 682
Total	10,002	... 6,535

13.—CO-OPERATION OF PARENTS.

The co-operation of parents is an important factor in the school medical service in at least three ways—by securing the prompt and efficient carrying out of the measures recommended by the School Medical Officers for the welfare of the children; by assisting in the punctual attendance of the children at Clinics for special examinations; and by the opportunity afforded for a more complete investigation of a child's predisposition to illnesses if the parent is present at the routine school medical inspection. In all these and other ways the help of the parents is indispensable, and although one would like to see still more parents present at the school inspections, their absence may perhaps be taken as indication that they have sufficient assurance in the school medical service to leave their children to its care.

14.—CO-OPERATION OF TEACHERS.

As few of the schools have rooms to spare for medical inspection work, one is very grateful to the teachers for the efforts they make to render the examination of the children as effective as possible. Besides giving valuable information about the children they are often able, by their friendly talks to the parents, to encourage them to follow the advice given by the School Medical Officers and Nurses. Without their help the School Clinics would lose much of their usefulness, as many children would, if left to themselves, fail to attend on the days appointed.

15.—CO-OPERATION OF SCHOOL ATTENDANCE OFFICERS.

The School Medical Service is much indebted to the School Attendance Officers for their helpfulness in giving information regarding delicate or otherwise defective children in their areas. They also undertake the duties of waiting on the children at the Feeding Centres and in the course of their work, visit the homes of the children to enquire into the circumstances of such as apply for free clogs or spectacles.

16.—BLIND, DEAF, DEFECTIVE AND EPILEPTIC CHILDREN.

Blind (including partially Blind) attending Certified Schools	Blind Home, Fulwood	3	Boys.
	Do. do.	3	Girls.
Deaf and Dumb attending Certified Schools	Royal Cross School, Preston	3	Boys.
	Do. do.	2	Girls.
	Boston Spa	2	Boys.
	Do.	1	Girl.
Mentally Defectives attending Certified Schools	Pontville	1	Boy.
	Allerton Priory	2	Girls.
	Moor Park Special School	44	Boys.
	Do. do.	37	Girls.

17.—MOOR PARK OPEN AIR SPECIAL SCHOOL FOR MENTALLY DEFECTIVE CHILDREN.

The number of children attending during the year was as shown in the following table :—

	Boys	Girls	Total
Number on books on 1st January, 1926 ...	44	26	70
Number admitted in 1926	11	16	27
Number discharged in 1926	11	5	16
Number on books on 1st January, 1927 ...	44	37	81

The table reveals an increase of 11 children on the register for the year. As an indication of the type of child dealt with at the school, an analysis of the intelligence quotients is shown in the accompanying table :—

I.Q.	Below 40	40—50	50—60	60—70	70—80	80 and over	Total
Boys ...	0	2	9	32	12	0	55
Girls ...	0	5	7	15	15	0	42
Total ...	0	7	16	47	27	0	97

Taking the school as a whole, it is seen that the children with an intelligence quotient of 60—70 form the largest group. Among the boys there is not the same tendency to extremes of deficiency as is shown among the girls. The girls show a bigger proportion of very defective and only slightly defective children, while the boys tend to preserve a more even level.

The average intelligence quotient of all the children in attendance during the year was as follows :—

Boys		Girls		All
64.4	...	65.0	...	64.7

Sixty-two of the children had their mental capacity re-tested during the year. The average intelligence quotient for all of them at the first test was 64.2, and at the second 63.6. This is a very close agreement, considering that in most cases the two groups of tests were made by different observers. Further details of the results of the second test, as compared with the first, are given below :—

	Boys	Girls	Total
Intelligence quotient up in ...	18	10	28
,, ,, down in	20	12	32
,, ,, same in	1	1	2

In the following table are given some particulars regarding the subsequent history of children discharged from the school in 1926 :—

	Boys	Girls	Total
At work in factory ...	3	2	5
Errand Boys	2	—	2
Station Cleaner	1	—	1
Farming and Dairying	2	—	2
At Wine Works	1	—	1
Housework at home...	—	1	1
At home, awaiting Institutional care	1	1	2
Returned to Public Elementary Schools ...	—	1	1
Left the District	1	—	1

18.—SECONDARY SCHOOLS.

PARK SCHOOL.

The health of the girls attending the Park School has been remarkably good during 1926. There were 480 examined during the year. The following up is in the hands of the Head Mistress. All those referred for treatment of defects had adequate attention. It is gratifying to notice that the number of those found with dental defects is considerably lower than last year.

Ages	8	9	10	11	12	13	14	15	16	17	18	19	Total
Malnutrition ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Skin Diseases ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Eye Diseases ...	...	...	4	4	4	7	...	2	1	1	1	...	24
Ear Diseases ...	...	...	1	1	2	1	...	...	1	...	...	...	6
Nose and Throat ...	...	...	3	3	5	1	1	1	...	...	...	...	14
Cervical Glands...	...	...	...	...	...	...	...	...	...	...	...	...	...
Defective Speech ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Teeth, Dental Diseases .	...	...	12	28	30	36	19	10	8	1	...	...	144
Heart and Circulation ...	...	...	...	1	1	1	...	...	...	...	...	...	3
Lungs	...	...	...	...	...	...	...	...	...	...	...	...	...
Tuberculosis—													
Pulmonary...	...	...	...	...	...	...	...	...	...	...	...	...	...
Non-Pulmonary ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nervous System ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Deformities ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Other Defects & Diseases	...	...	...	1	1	2	2	1	2	1	...	...	10
Total Number Examined	...	...	24	72	106	108	68	47	34	15	5	1	480

WINCKLEY SQUARE CONVENT SCHOOL.

There were 306 girls examined during 1926, this being the first full year's inspection for this school. There is a noticeable improvement in the girls due to last year's work and the Head Mistress who has undertaken the work of "following up," is greatly pleased with the results, especially in connection with eye and throat defects, all of which have had attention. More trouble was experienced in having dental defects remedied.

Great improvement has been effected in the gymnasium which has been fully fitted up with apparatus and a qualified instructress has been appointed who, in addition to the usual lessons, has begun remedial work for the improvement of dorsal curvatures and incorrect standing position and carriage.

Ages.	8	9	10	11	12	13	14	15	16	17	18	Total
Malnutrition	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Skin Diseases	.....	.....	.....	.....	.....	2	.....	.....	.....	.....	.....	2
Eye Diseases	.....	.....	.....	4	5	5	4	2	1	.....	1	22
Ear Diseases	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Nose and Throat	.....	.....	.....	1	5	2	.....	1	.....	.....	.....	9
Cervical Glands	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Defective Speech	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Teeth, Dental Diseases	.....	.....	.....	17	31	19	18	20	5	7	1	118
Heart and Circulation	.....	.....	.....	.....	2	2	.....	1	1	.....	.....	6
Lungs	.....	.....	.....	.....	1	1	.....	.....	.....	.....	.....	2
Tuberculosis—												
Pulmonary	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Non-Pulmonary.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Nervous System	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Deformities	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Other Defects and Diseases	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total No. Examined.....	.....	.....	1	62	81	46	43	41	10	17	5	306

GRAMMAR SCHOOL.

The details of the findings of medical inspection are as follow :—

Ages.	8	9	10	11	12	13	14	15	16	17	18	Total
Malnutrition	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Skin Diseases	.....	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	1
Eye Diseases	.....	2	.....	1	8	8	8	9	2	.....	2	40
Ear Diseases	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	.....	1
Nose and Throat	.....	.....	.....	2	1	2	1	1	1	1	.....	9
Cervical Glands	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Defective Speech	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Teeth, Dental Diseases	.....	.....	.....	2	2	9	1	6	6	.....	.....	26
Heart and Circulation	.....	.....	.....	.....	1	.....	1	.....	.....	.....	.....	2
Lungs	.....	.....	.....	.....	1	.....	.....	.....	.....	.....	.....	1
Tuberculosis—												
Pulmonary	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Non-Pulmonary.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Nervous System	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Deformities	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Other Defects and Diseases	.....	.....	.....	.....	1	.....	.....	1	.....	.....	.....	2
Total No. Examined.....	5	7	14	27	57	68	60	64	34	10	3	349

The school is visited on one session per week during the first two terms. As before, defective vision and carious teeth form the chief items requiring treatment, and, thanks to the co-operation of the Head Master, the various defects noted are usually dealt with very promptly. The percentage of boys found to require treatment was 23.5.

CATHOLIC COLLEGE.

The details of the findings of medical inspection are as follow :—

Ages.	7	8	9	10	11	12	13	14	15	16	17	18	Total
Malnutrition	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Skin Diseases	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Eye Diseases	.....	.....	.....	.....	1	2	1	.....	4	.....	2	1	12
Ear Diseases	.....	.....	.....	.....	.....	2	.....	.....	1	.....	.....	.....	3
Nose and Throat	.....	.....	.....	.....	1	3	1	4	.....	.....	1	.....	10
Cervical Glands	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Defective Speech	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Teeth, Dental Diseases	.....	.....	.....	1	1	4	2	1	1	2	1	.....	13
Heart and Circulation	.....	.....	.....	.....	.....	2	.....	2	.....	1	.....	.....	5
Lungs	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Tuberculosis—													
Pulmonary	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Non-Pulmonary	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Nervous System	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Deformities	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Other Defects and Diseases	.....	.....	.....	1	1	.....	3	.....	.....	.....	.....	.....	5
Total Number Examined	.....	1	8	20	47	46	54	52	31	16	16	3	303

The total number of defects referred for treatment is less than that for last year. This is largely accounted for by the fact that prompt attention is given to the School Medical Officer's recommendations for treatment. The percentage of boys found to require treatment was 15.8.

TABLE I.

Return of Medical Inspections, 1st January to 31st December, 1926.

A.—ROUTINE MEDICAL INSPECTIONS.

	Number of Code Group Inspections		Total
	Boys	Girls	
Entrants	1465	1400	2865
Intermediates	1434	1346	2780
Leavers	322	303	625
No. of other Routine Inspections	...	..	...
Total	3221	3049	6270

B.—OTHER INSPECTIONS.

	Boys	Girls	Total
No. of Special Inspections	36	56	92
No. of Re-Inspections	1189	1248	2437
Total	1225	1304	2529

TABLE II.

Return of Defects found by Medical Inspection in the year ended 31st December, 1926.

DEFECT OR DISEASE. 1		ROUTINE INSPECTION NO. OF DEFECTS. Requiring Treatment 2	ROUTINE INSPECTION NO. OF DEFECTS. Requiring to be kept under observation but not requiring Treatment 3	SPECIAL INSPECTIONS NO. OF DEFECTS. Requiring Treatment 4	SPECIAL INSPECTIONS NO. OF DEFECTS. Requiring to be kept under observation but not requiring Treatment 5
Malnutrition		...	...	...	...
Uncleanliness Head		...	...	...	...
,, Body		...	...	...	...
Skin	Ringworm, Scalp	1	...	...	...
	,, Body	...	...	...	...
	Scabies	...	...	...	...
	Impetigo	5	...	...	...
	OtherDiseases(non-tubercular)	20	3	...	1
Eye	Blepharitis	10	2	...	...
	Conjunctivitis	4	...	1	...
	Keratitis	...	...	...	...
	Corneal Opacities	4	...	...	...
	Defective Vision	477	76	78	4
	Squint	57	3	9	1
	Other Conditions	2	...	...	...
Ear	Defective Hearing	3	3	...	...
	Otitis Media	27	1	...	...
	Other Ear Diseases	3	1	1	...
Nose and Throat	Enlarged Tonsils	290	142	66	15
	,, Adenoids	10	3	3	...
	Enlarged Tonsils and Adenoids	4	1	5	...
	Other Conditions	6	9	3	...

Enlarged Cervical Glands (non-tubercular).		38	5	5	...
Defective Speech		...	...	...	...
Teeth :—Dental Diseases		81	1	2	...
Heart and Circulation	Heart Disease :—				
	Organic	4	...	1	...
	Functional	18	43	10	7
	Anaemia	36	7	4	...
Lungs	Bronchitis	60	35	5	...
	Other non-tubercular Diseases	21	20	5	...
Tuberculosis	Pulmonary :—				
	Definite	...	...	...	...
	Suspected	1	6	...	...
	Non-Pulmonary :—				
	Glands	...	1	...	...
	Spine	...	...	...	...
	Hip	...	...	...	...
	Other Bones and Joints..	...	...	...	...
	Skin	...	...	...	...
	Other Forms	...	...	...	...
Nervous System	Epilepsy	...	...	...	...
	Chorea	...	...	...	...
	Other Conditions	...	...	...	...
Deformities	Rickets	...	...	...	...
	Spinal Curvature	...	...	...	...
	Other Forms	2	...	...	...
Other Defects and Diseases		5	4	2	1

TABLE III.—Return of all Exceptional Children in the Area.

			Boys	Girls	Total
BLIND (including partially blind).	(i) Suitable for training in a School or Class for the totally blind.	Attending Certified School or Classes for the Blind	4	2	6
		Attending Public Elementary Schools	...	...	...
		At Other Institutions	...	...	...
		At no School or Institution	...	...	...
	(ii) Suitable for training in a School or Class for the partially blind.	Attending Certified School or Classes for the Blind	...	1	1
		Attending Public Elementary Schools	1	2	3
		At Other Institutions	...	...	...
		At no School or Institution	1	3	4
DEAF (including Deaf and Dumb and partially deaf).	(i) Suitable for training in a School or Class for the totally deaf and dumb.	Attending Certified School or Classes for the Deaf	5	5	10
		Attending Public Elementary Schools	...	...	...
		At Other Institutions	...	...	...
		At no School or Institution	...	...	...
	(ii) Suitable for training in a School or Class for the partially deaf.	Attending Certified School or Classes for the Deaf	...	...	...
		Attending Public Elementary Schools	...	1	1
		At Other Institutions	...	...	...
		At no School or Institution	...	...	...
MENTALLY DEFECTIVE.	Feeble-minded (cases not notifiable to the Local Control Authority).	Attending Certified Schools for Mentally Defective Children	47	35	82
		Attending Public Elementary Schools	33	29	62
		At Other Institutions	...	...	...
		At no School or Institution	...	...	...
	Notified to the Local Control Authority.	Feebleminded	3	4	7
		Imbeciles	11	9	20
		Idiots	4	2	6
EPILEPTICS.	Suffering from severe Epilepsy.	Attending Certified Special Schools for Epileptics	1	1	2
		In Institutions other than Certified Special Schools	...	...	...
		Attending Public Elementary Schools	1	...	1
		At no School or Institution	1	1	2

	not severe.	At no School or Institution	...	...	...
PHYSICALLY DEFECTIVE.	Infectious Pulmonary and Glandular Tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	...	...	...
		At Other Institutions	...	...	...
		At no School or Institution	...	4	4
	Non-infectious but active Pulmonary and Glandular Tuberculosis.	At Sanatoria or Sanatorium Schools approved by the Ministry of Health or the Board	...	...	...
		At Certified Residential Open Air Schools	...	...	...
		At Certified Day Open Air Schools	3	2	5
		At Public Elementary Schools	11	7	18
		At Other Institutions	1	...	1
		At no School or Institution	...	1	1
	Delicate Children (e.g., pre or latent Tuberculosis, Malnutrition, Debility, Anæmia, etc.).	At Certified Residential Open Air Schools	...	...	...
		At Certified Day Open Air Schools	108	130	238
		At Public Elementary Schools	44	45	89
		At Other Institutions	...	...	...
		At no School or Institution	3	5	8
	Active non-pulmonary Tuberculosis.	At Sanatoria or Hospital Schools approved by the Ministry of Health or the Board	...	...	...
		At Public Elementary Schools	8	6	14
		At Other Institutions	...	...	...
		At no School or Institution	1	...	1
	Crippled Children (other than those with active Tuberculous disease, e.g., children suffering from paralysis, etc., and including those with severe heart disease).	At Certified Hospital Schools	...	...	...
		At Certified Residential Cripple Schools	...	...	...
		At Certified Day Cripple Schools	2	4	6
		At Public Elementary Schools	47	39	86
		At Other Institutions	1	...	1
		At no School or Institution	7	5	12

B.—Number of individual children found at Routine Medical Inspection to require treatment (excluding Uncleanliness and Dental Diseases).

Group	Number of Children		Percentage of Children found to require Treatment
	Inspected	Found to require Treatment	
(1)	(2)	(3)	(4)
Code Groups :			
Entrants	2865	284	9·9
Intermediates	2780	655	23·6
Leavers	625	113	18·1
Total (Code Groups).........	6270	1052	16·8
Other Routine Inspections...	...	...	...

TABLE IV.

Return of Defects Treated during the year ended 31st December, 1926.

TREATMENT TABLE.

GROUP I.—Minor Ailments (Excluding Uncleanliness, for which see Group V.).

Disease or Defect	Number of Defects treated, or under Treatment during the year.		
	Under the Authority's Scheme	Otherwise	Total
(1)	(2)	(3)	(4)
Skin—			
Ringworm, Scalp and Body	95	4	99
Scabies	4	—	4
Impetigo	485	7	492
Other Skin Disease	42	6	48
Minor Eye Defects—			
External and other, but excluding cases falling in Group II.	219	9	228
Minor Ear Defects	253	25	278
Miscellaneous, (e.g. Minor Injuries, Bruises, Sores, Chilblains, etc.)	2251	21	2272
Total	3349	72	3421

TABLE IV.—*Contd.*

GROUP II.—Defective Vision and Squint (Excluding Minor Eye Defects Treated as Minor Ailments—Group I.).

Defect or Disease	Number of Defects dealt with			
	Under the Authority's Scheme	Submitted to Refraction by Private Practitioner or at Hospital apart from the Authority's Scheme	Otherwise	Total
(1)	(2)	(3)	(4)	(5)
Errors of Refraction (including Squint) ...	975	36	37	1048
Other Defect or Disease of the Eye (excluding those recorded in Group I.)	...	...	...	...
Total	975	6	37	1048

Total number of children for whom spectacles were prescribed—

(a) Under the Authority's Scheme...	750
(b) Otherwise	45

Total number of children who obtained or received spectacles—

(a) Under the Authority's Scheme...	570
(b) Otherwise	45

The number of children who were provided with glasses by the Education Committee was 28.

TABLE IV.—*Contd.*

Group III.—Treatment of Defects of Nose and Throat.

Number of Defects.				
Received Operative Treatment.				
Under the Authority's Scheme, in Clinic or Hospital	By Private Practitioner or at Hospital, apart from the Authority's Scheme	Total	Received other forms of Treatment	Total Number Treated
(1)	(2)	(3)	(4)	(5)
461	23	484	222	706

TABLE IV.—*Contd.*

GROUP IV.—Dental Defects.

(1) Number of Children who were :—

(a) Inspected by the Dentist :

	Aged :			
Routine Age Groups.	5......	—	Total ...	4224
	6......	2109		
	7......	1500		
	8......	408		
	9......	21		
	10......	37		
	11......	40		
	12......	46		
	13......	53		
	14......	9		
	15......	—		
	16......	1		
Specials ...				1593
Grand Total ...				5817

	Routine	Special	Total
(b) Found to require treatment ...	1994	1593	3587
(c) Actually treated	1241	1593	2834
(d) Re-treated during the year as the result of periodical examination	284	...	284

(2)	Half-days devoted to...	Inspection	39	Total ... 916
		Treatment	877	
(3)	Attendances made by children for treatment			6280
(4)	Fillings	Permanent Teeth ...	7735	Total ... 7735
		Temporary Teeth ...	—	
(5)	Extractions	Permanent Teeth ...	872	Total ... 1977
		Temporary Teeth ...	1105	
(6)	Administrations of general anæsthetics for extractions			434
(7)	Other operations	Permanent Teeth ...	2786	Total ... 2786
		Temporary Teeth ...	—	

GROUP V.—Uncleanliness and Verminous Conditions.

(1) Average number of visits per school made during the year by the School Nurses		3
(2) Total number of examinations of children in the schools by School Nurses		18565
(3) Number of individual children found unclean—	Few Nits	3835
	Moderate Nits ...	1963
	Severe Nits ...	390
	Vermin	34
	Total	6222
(4) Number of children cleansed under arrangements made by the Local Education Authority		17
(5) Number of cases in which legal proceedings were taken :—		
(a) Under the Education Act, 1921		—
(b) Under School Attendance Bye-laws		—